Image# 12952156934		PAGE 1 / 103
	<b>PORT OF RECEIPTS</b> <b>ID DISBURSEMENTS</b> Other Than An Authorized Committee	
1. NAME OF <b>TYP</b>	E OR PRINT ▼ Example: If typing, type	Office Use Only
COMMITTEE (in full)	over the lines.	12FE4M5
The Northwestern Mutual	Life Insurance Company Federal PAC	
ADDRESS (number and street)	20 E Wisconsin Ave	
Check if different		
than previously M reported. (ACC)	ilwaukee	WI 53202
2. FEC IDENTIFICATION NUMB		STATE ZIP CODE
C C00197095	3. IS THIS REPORT X (N) O	R AMENDED (A)
<ul> <li><b>4. TYPE OF REPORT</b> (Choose One)</li> <li>(a) Quarterly Reports:</li> </ul>	D)         Monthly Report Due On:         Feb 20 (M2)         May 20 (M2)           Mar 20 (M3)         X         Jun 20 (M3)         Jun 20 (M3)	(Non-Election Year Only)
April 15	Apr 20 (M4) Jul 20 (M	
Quarterly Report (Q1)	(c) 12-Day Primary (12P) PRE-Election	General (12G) Runoff (12R)
Quarterly Report (Q2) October 15 Quarterly Report (Q3)	Report for the: Convention (12C)	Special (12S)
January 31 Year-End Report (YE)	Election on	/ Y Y Y Y in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day <b>POST</b> -Election General (30G) Report for the:	Runoff (30R) Special (30S)
Termination Report (TER)	Election on	/ Y Y Y Y in the State of
5. Covering Period 05	01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
I certify that I have examined this Re	eport and to the best of my knowledge and belief it is	s true, correct and complete.
Type or Print Name of Treasurer M	ichelle A. Hinze	
Signature of Treasurer	Hinze [Electronically Filed]	Date 06 / 19 / Y Y Y Y 2012
NOTE: Submission of false, erroneous,	or incomplete information may subject the person signi	ng this Report to the penalties of 2 U.S.C. §437g.
Office Use Only		FEC FORM 3X Rev. 12/2004

#### 06/19/2012 15 : 13

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

#### The Northwestern Mutual Life Insurance Company Federal PAC

R	eport Covering the Period: From: 05	M         /         D         /         Y	Fo: 05 31 2012
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		175135.90
	(b) Cash on Hand at Beginning of Reporting Period	112819.55	
	(c) Total Receipts (from Line 19)	30866.26	156544.91
	<ul><li>(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)</li></ul>	143685.81	331680.81
7.	Total Disbursements (from Line 31)	48744.09	236739.09
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	94941.72	94941.72
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> 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

X

	DE	TAILED SUMMARY PAGE of Receipts	Г
	FEC Form 3X (Rev. 06/2004)		Page <b>3</b>
Ν	rite or Type Committee Name		
Т	he Northwestern Mutual Life Insurar	nce Company Federal PAC	
R	eport Covering the Period: From: 05	/ D D / Y Y Y Y 01 2012 To:	05 / D / Y Y Y Y Y 2012
	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)	24966.00	107948.67
	(ii) Unitemized	5899.34	48591.28
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	, 30865.34	156539.95
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(such as PACs) (d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	30865.34	156539.95
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.92	4.96
	(a) Non-Federal Account (from Schedule H3)	0.00	, 0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))►	30866.26	156544.91
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	30866.26	156544.91

Image# 12952156936

#### DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)		Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.0
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	244.09	1239.09
(c) Total Operating Expenditures	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	7 7 7
(add 21(a)(i), (a)(ii), and (b))►	244.09	1239.0
Transfers to Affiliated/Other Party Committees	0.00	0.0
Contributions to Federal Candidates/Committees and Other Political Committees	48500.00	224000.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures (2 U S C 8441a(d))		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	7 7
(such as PACs)	0.00	0.00
<ul> <li>(d) Total Contribution Refunds</li> <li>(add Lines 28(a), (b), and (c))</li> </ul>	0.00	0.00
Other Disbursements	0.00	11500.00
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
		0.00
<ul><li>(ii) "Levin" Share</li><li>(b) Federal Election Activity Paid Entirely</li></ul>	0.00	7
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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	48744.09	236739.0
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	48744.09	236739.09
from Line 31)	40/44.09	230739.09

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#### DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	30865.34	156539.95
<ol> <li>Total Contribution Refunds (from Line 28(d))</li> </ol>	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30865.34	156539.95
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	244.09	1239.09
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	244.09	1239.09

FOR LINE NUMBER:

PAGE

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		Use separate schedule(s)	(che	eck only	on	e)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12	2	
Any information copied from such Reports and					purp				ibutio	
or for commercial purposes, other than using th	e name and a	ddress of any political committee	e to so	licit con	Itribu	utions fr	om such	n comi	mittee	9.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PAC	С							
Full Name (Last, First, Middle Initial) <b>A.</b> Mark J Backe				Date of	Red	ceipt				
Mailing Address 4419 N Wildwood Ave				м м 05	/	D D D	/ Y	2012		1
City Shorewood	State WI	Zip Code 53211-1408		Trans		on ID : 2	2012052 eceipt th	91986	-635	-
FEC ID number of contributing federal political committee.	C			mount		1	1		22.0	0
Name of Employer NML	Occupation VP Ins & Op									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00								
Full Name (Last, First, Middle Initial) <b>B. Douglas P Bates</b>	'			Date of	Red	ceipt				
Mailing Address 5413 Mount Corcoran Pl				м м 05	/	D D D 15	/ Y	y 2012		1
City	State VA	Zip Code					2012051			3
Burke FEC ID number of contributing federal political committee.	C	22015-2188		4mount	of I	⊨acn Re	eceipt th	is Per	iod 55.0	D
Name of Employer NML	Occupation VP Federal									
Receipt For:		Year-to-Date ▼								
Primary General Other (specify) ▼		550.00								
Full Name (Last, First, Middle Initial) C. Douglas P Bates	I			Date of	Red	ceipt				
Mailing Address 5413 Mount Corcoran PI				м м 05	/	31	/ Y	2012		1
City Burke	State VA	Zip Code 22015-2188				-	2012052 eceipt th			
FEC ID number of contributing federal political committee.	С			mount			, j		55.0	0
Name of Employer	Occupation									
NML Receipt For:	VP Federal		_							
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00								
SUBTOTAL of Receipts This Page (optional)			•			,		1	32.00	)
TOTAL This Period (last page this line number	only)	••••••	-			,				

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

(check only one)

PAGE 7 OF

			Detailed Summary Page		11a 13	$\vdash$	11b 14	11c		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the							f solicit		ontribut	tions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In										
A.	Full Name (Last, First, Middle Initial) Blaise C Beaulier				Date of	Re	eceipt				
	Mailing Address 23300 Dover Line Rd				м м 05	/	15		2	2012	
	City Waterford	State WI	Zip Code 53185-4908				ion ID : Each F				37
	FEC ID number of contributing federal political committee.	С					7	,		30	.00
	Name of Employer NML	Occupation VP IS									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00								
в.	Full Name (Last, First, Middle Initial) Blaise C Beaulier				Date of	Re	eceipt				
	Mailing Address 23300 Dover Line Rd				м м 05	1	31	D /	ү ү 2	012	Y
	City Waterford	State WI	Zip Code 53185-4908				i <b>on ID :</b> Each F				7
	FEC ID number of contributing federal political committee.	С					7			30.	.00
	Name of Employer NML	Occupation VP IS									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00								
c.	Full Name (Last, First, Middle Initial) Mitchell C. Beer				Date of	Re	eceipt				
	Mailing Address 3387 Hampton Ct				м м 05	/	15			2012	Y
	City Thousand Oaks	State CA	Zip Code 91362-1130				ion ID : Each F				0
	FEC ID number of contributing federal political committee.	С					7			125	.00
	Name of Employer	Occupation									
	Self-Employed Receipt For:	General Ins	urance Agent	_							
	Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		1250.00								
s	UBTOTAL of Receipts This Page (optional)						7			185.	00
т	OTAL This Period (last page this line number	only)		•			,	,			

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

(check only one)

PAGE

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			Detailed Summary Page		11a 13		11b 14	11c		12 16	17
	y information copied from such Reports and St for commercial purposes, other than using the							soliciting		ntribut	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С							
A.	Full Name (Last, First, Middle Initial) Mitchell C. Beer				Date of	Re	ceipt				
	Mailing Address 3387 Hampton Ct				м м 05	/	31	/ Y	20	) 12	Y
	City Thousand Oaks	State CA	Zip Code 91362-1130				i <b>on ID :</b> Each Re			-	40
	FEC ID number of contributing federal political committee.	С						7	_	125.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00								
В.	Full Name (Last, First, Middle Initial) J. Philip Bender			-	Date of	Re	ceipt				
	Mailing Address 116 Belden Hill Rd				м м 05	/	D D 15	/ Y		)12	Y
	City Wilton	State CT	Zip Code 06897-2911				on ID : 2 Each Re				3
	FEC ID number of contributing federal political committee.	С					7	7	_	50.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00								
с.	Full Name (Last, First, Middle Initial) J. Philip Bender				Date of	Re	ceipt				
	Mailing Address 116 Belden Hill Rd				м м 05	/	D D 31	/ Y		)12	Ŷ
	City Wilton	State CT	Zip Code 06897-2911				ion ID : 2 Each Re				43
	FEC ID number of contributing federal political committee.	С					,	7	_	50.	00
	Name of Employer	Occupation									
	Self-Employed	General Ins	urance Agent	_							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		500.00								
s	UBTOTAL of Receipts This Page (optional)			•			7	- 7		225.0	00
т	OTAL This Period (last page this line number of	only)	•••••				7				

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

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			Detailed Summary Page	X 11a 11b 11c						12	
			Detailed Summary Page	ĹĔ	13		14	15		16	17
	y information copied from such Reports and S for commercial purposes, other than using the										
$\backslash$	NAME OF COMMITTEE (In Full)										
	The Northwestern Mutual Life In	nsurance	Company Federal PA	2							
Α.	Full Name (Last, First, Middle Initial) Beth M Berger				Date o	f Re	eceipt				
	Mailing Address 4141 N Murray Ave				M N	/	15			2012	Y
	City	State	Zip Code		Trans	sact	tion ID	: 2012051	119	<del>)</del> 737-5	29
	Shorewood	WI	53211-2011	_	Amoun	t of	Each I	Receipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С					7		_	32	.00
	Name of Employer NML	Occupation Ast Gn Cnl	& Ast Sec/Secur								
	Receipt For:		Year-to-Date ▼								
	Primary General	Ayyreyale		11							
	Other (specify)		320.00								
В.	Full Name (Last, First, Middle Initial) Beth M Berger				Date o	f Re	eceipt				
	Mailing Address 4141 N Murray Ave				M	/	D	D / Y	Y	Y	Y
					05		31		20	012	
	City	State	Zip Code		Trans	sact	ion ID :	2012052	<u>919</u>	86-52	9
	Shorewood	WI	53211-2011		Amoun	t of	Each I	Receipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С					7		_	32.	00
	Name of Employer	Occupation	l								
	NML	Ast Gn Cnl	& Ast Sec/Secur								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		320.00								
— C.	Full Name (Last, First, Middle Initial) Dwaan C. Black				Date o	f Re	eceipt				
	Mailing Address 3520 Dumbarton Rd NW				M M	/				012	Y
	City	State GA	Zip Code					: 201205			5
	Atlanta	GA	30327-2614	_	Amoun	t of	Each I	Receipt th	nis F	<sup>2</sup> eriod	
	FEC ID number of contributing federal political committee.	С					7		_	42	.00
	Name of Employer	Occupation	1	$\neg$							
	Self-Employed	General Ins	surance Agent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	50 0 0									
	Other (specify)		420.00								
s	UBTOTAL of Receipts This Page (optional)			•						106.	00
	OTAL This Period (last page this line number			-							
1 <sup>-</sup>		,,,			<b>Market</b>	1		- 7 -	a di second	- 1 - A	

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

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	EMIZED RECEIPIS				×	11a		11b	11c		12	
	Detailed Summary Page       118       110       12       117       110       112       110       11											
$\backslash$	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	The Northwestern Mutual Life In	surance	Company Federa	I PAC								
Α.	Full Name (Last, First, Middle Initial) Dwaan C. Black				D	ate of	Re	ceipt	_	_		_
	Mailing Address 3520 Dumbarton Rd NW						/		) / Y			Y
	City		Zip Code			Trans	acti	on ID :	2012053	119	5241-	35
	Atlanta	GA	30327-2614		Ai	mount	of	Each F	Receipt th	nis F	eriod	
	FEC ID number of contributing federal political committee.	С						<b>y</b>			42.	00
	Name of Employer	Occupation			1							
	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼		]							
			420.	.00								
в.	Full Name (Last, First, Middle Initial)				D	ate of	Re	ceipt				
	Mailing Address 5460 Chelsea Ave						/			20	)12	Y
	City	State	Zip Code			Transa	acti	on ID :	2012051	519	751-14	4
	La Jolla	CA	92037-7607		Ai	mount	of	Each F	Receipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С						y			25.	00
	Name of Employer	Occupation			1							
	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼		1							
			, 250.	.00								
с.	Full Name (Last, First, Middle Initial)					ate of	Ro	ceint				
0.	Mailing Address 5460 Chelsea Ave				1 _	M – M	/	DE	) / Y			Y
	City La Jolla		•							8119	5241-	14
	FEC ID number of contributing federal political committee.	С				inount	. 01	,	10001011			00
	Name of Employer	Occupation			-							
	Self-Employed	General Ins	urance Agent									
	Receipt For:				1							
		00 - 0										
	Other (specify)		250	.00								
s	UBTOTAL of Receipts This Page (optional)			····· ►				7			92.	00
т	OTAL This Period (last page this line number of	only)		····· ►				,				

FOR LINE NUMBER:

PAGE 11 OF

Mailing Address 165 Pine Ct       05         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing federal political committee.       C       Amount         Name of Employer       Occupation       General Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼       625.00         Primary       General       625.00         B. Debra Blevons       Date of City       Other (specify) ▼         Mailing Address 165 Pine Ct       05       Trans         City       State       Zip Code       05         Trans       Mile memory       Other (specify)       Date of	
Any information copied from such Reports and Statements may not be sold or used by any person for the or for commercial purposes, other than using the name and address of any political committee to solicit committee to solicit committee to solicit committee to solicit committee.         NAME OF COMMITTEE (In Full)       The Northwestern Mutual Life Insurance Company Federal PAC         Full Name (Last, First, Middle Initial)       Debra Blevons         A.       Debra Blevons         Mailing Address 165 Pine Ct       Date of 05         City       State       Zip Code         Appleton       W1       54914-8222         FEC ID number of contributing federal political committee.       Occupation         Self-Employed       General       General         Other (specify) ▼       Aggregate Year-to-Date ▼       625.00         Full Name (Last, First, Middle Initial)       B.       Debra Blevons       Date of 05         Mailing Address 165 Pine Ct       General       05       Trans         Other (specify) ▼       Aggregate Year-to-Date ▼       Date of 05       Trans         Full Name (Last, First, Middle Initial)       B.       Debra Blevons       Date of 05         Mailing Address 165 Pine Ct       05       Trans       Amount 05         City       State       Zip Code       Trans         Appleton       <	purpose of soliciting contributions
The Northwestern Mutual Life Insurance Company Federal PAC         Full Name (Last, First, Middle Initial)         A. Debra Blevons         Mailing Address 165 Pine Ct         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing federal political committee.       C       Mailing Address         Name of Employer       Occupation       General Insurance Agent         Receipt For:       Primary       General       625.00         Full Name (Last, First, Middle Initial)       B. Debra Blevons       Date of Cost         Mailing Address 165 Pine Ct       05       Trans         City       State       Zip Code         Mailing Address 165 Pine Ct       05       Trans         City       State       Zip Code         Appleton       WI       54914-8222         Mailing Address 165 Pine Ct       05         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing       C       05	
Full Name (Last, First, Middle Initial)       Date of         A. Debra Blevons       Date of         Mailing Address 165 Pine Ct       05         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing federal political committee.       C       Amoun         Name of Employer       Occupation       General Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼       625.00         Full Name (Last, First, Middle Initial)       B. Debra Blevons       Date of         Mailing Address 165 Pine Ct       05       Trans         City       State       Zip Code       05         Appleton       WI       54914-8222       Date of         Full Name (Last, First, Middle Initial)       Date of       05         Trans       General       625.00       05         Full Name (Last, First, Middle Initial)       Date of       05       05         Mailing Address 165 Pine Ct       05       05       05         FEC ID number of contributing       C       05       05         FEC ID number of contributing       C       05       05         FEC ID number of contributing       C       05       05	
A. Debra Blevons       Date of Mailing Address 165 Pine Ct         Mailing Address 165 Pine Ct       05         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing federal political committee.       C       Amount         Name of Employer       Occupation       General Insurance Agent       Amount         Receipt For:       Aggregate Year-to-Date ▼       625.00       Easter Committee         Primary       General       General       625.00       Date of Committee         Full Name (Last, First, Middle Initial)       B. Debra Blevons       Date of City       Date of City         Mailing Address 165 Pine Ct       05       Trans       Amount for the City         City       State       Zip Code       Trans         Appleton       WI       54914-8222       Amount for the City         FEC ID number of contributing       C       C       Mailing Address	
City     State     Zip Code     Trans       Appleton     WI     54914-8222     Amount       FEC ID number of contributing federal political committee.     C     Amount       Name of Employer     Occupation     General Insurance Agent     Aggregate Year-to-Date ▼       Name (Last, First, Middle Initial)     General     625.00     Date of Cost       Full Name (Last, First, Middle Initial)     Date of Cost     05       B.     Debra Blevons     Ost     Ost       Mailing Address 165 Pine Ct     05     Trans       City     State     Zip Code     Trans       Appleton     WI     54914-8222     Amount	of Receipt
Appleton       WI       54914-8222       Amount         FEC ID number of contributing federal political committee.       C       Amount       Amount         Name of Employer       Occupation       General Insurance Agent       Aggregate Year-to-Date ▼       Fear-to-Date ▼       625.00         Name (Last, First, Middle Initial)       B. Debra Blevons       625.00       Date of the fear-to-Date ▼       05         City       State       Zip Code       Trans         Appleton       WI       54914-8222       Amount	15 2012
FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         Self-Employed       General Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       625.00         B. Debra Blevons       Date of State         Mailing Address 165 Pine Ct       05         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing       C	saction ID : 2012051519751-70
federal political committee.       Occupation         Name of Employer       Occupation         Self-Employed       General Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       625.00         Full Name (Last, First, Middle Initial)       Date of the formation of the formatio	nt of Each Receipt this Period
Self-Employed       General Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       625.00         Full Name (Last, First, Middle Initial)       625.00         B. Debra Blevons       Date of the first for	62.50
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       625.00         Full Name (Last, First, Middle Initial)       Date of         B. Debra Blevons       Date of         Mailing Address 165 Pine Ct       05         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing       C	
Primary       General         Other (specify)       General         B.       Debra Blevons         Mailing Address 165 Pine Ct       Date of         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing       General	
Other (specify)       625.00         Full Name (Last, First, Middle Initial)       Date of         B. Debra Blevons       Date of         Mailing Address 165 Pine Ct       05         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing       Output	
Full Name (Last, First, Middle Initial)       Date of         B. Debra Blevons       Date of         Mailing Address 165 Pine Ct       05         City       State       Zip Code         Appleton       WI       54914-8222         FEC ID number of contributing       O	
B. Debra Blevons       Mailing Address 165 Pine Ct     Date of       City     State     Zip Code       Appleton     WI     54914-8222       FEC ID number of contributing     C	
City     State     Zip Code     Trans       Appleton     WI     54914-8222     Amount       FEC ID number of contributing     C     Trans     Trans	of Receipt
City     State     Zip Code     Trans       Appleton     WI     54914-8222     Amount       FEC ID number of contributing     C     Trans     C	31 _2012 _
FEC ID number of contributing	saction ID : 20120531195241-70
•	nt of Each Receipt this Period
	62.50
Name of Employer Occupation	
Self-Employed General Insurance Agent	
Receipt For: Aggregate Year-to-Date ▼	
Primary     General       Other (specify) ▼     625.00	
Full Name (Last, First, Middle Initial) C. Timothy John Bohannon Date of	of Receipt
Mailing Address 8677 Alvarado Ct 05	15 2012
	saction ID : 2012051519751-16
Inver Grove MN 55077-3121 Amoun	nt of Each Receipt this Period
FEC ID number of contributing federal political committee.	208.00
Name of Employer Occupation	
Self-Employed General Insurance Agent	
Receipt For: Aggregate Year-to-Date ▼	
Primary General	
Other (specify)  2080.00	
SUBTOTAL of Receipts This Page (optional)	

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

(check only one)

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		Detailed Summary Page		-		11b	11c	12	<b>—</b>
Any information copied from such Report									
or for commercial purposes, other than u	ising the name and a	ddress of any political committee	e to so	licit cor	ntrib	outions f	rom such	ı commi	ttee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual	Life Insurance	Company Federal PA	С						
Full Name (Last, First, Middle Initial) <b>A.</b> Timothy John Bohannon				Date of	Re	eceipt			
Mailing Address 8677 Alvarado Ct				м м 05	/	31	) / Y	2012	Y
City	State	Zip Code		Trans	act	ion ID :	2012053	1195241	-16
Inver Grove	MN	55077-3121	/	Amount	t of	Each R	leceipt th	is Perior	b
FEC ID number of contributing federal political committee.	С					7	7	20	8.00
Name of Employer	Occupation	1							
Self-Employed	General Ins	surance Agent							
	Aggregate	Year-to-Date ▼							
Primary     General       Other (specify) ▼		2080.00							
Full Name (Last, First, Middle Initial) B. Sandra L Botcher				Date of	Re	eceipt			
Mailing Address 15375 Kata Dr				м м 05	/	15	/ Y	2012	Y
City	State	Zip Code		Trans	acti	ion ID :	2012051 <sup>.</sup>	<u>119737-</u>	812
Elm Grove	WI	53122-1028		Amount	t of	Each R	leceipt th	is Period	b
FEC ID number of contributing federal political committee.	С					7	,	60	6.00
Name of Employer NML	Occupation VP Disabilit								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 660.00	1						
Full Name (Last, First, Middle Initial) C. Sandra L Botcher				Date of	Re	eceipt			
Mailing Address 15375 Kata Dr				м м 05	/	31	) / Y	y y 2012	Y
City Elm Grove	State WI	Zip Code 53122-1028					2012052		
FEC ID number of contributing federal political committee.	C			Amouni			leceipt th		6.00
Name of Employer	Occupation	1							
NML	VP Disabili	ty Income							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify)		660.00	11						
			1						
SUBTOTAL of Receipts This Page (opti	onal)					,	,	34(	0.00
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17			Use separate schedule(s)	(ch	eck only	, one	e)				
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		< 11a		11b	11c		12	
	y information copied from such Reports and Si for commercial purposes, other than using the					purpo			g cont		
	NAME OF COMMITTEE (In Full)										
$\rangle$	The Northwestern Mutual Life In	surance	Company Federal PAC	C							
Α.	Full Name (Last, First, Middle Initial) Mark C Boyle				Date of	Rec	eipt				
	Mailing Address 720 E Wisconsin Ave				м м 05	1	D D D	/ Y	20 <sup>2</sup>	1 O	Y
	City	State	Zip Code			actio		2012051			5
	Milwaukee	WI	53202-4703	_	Amount	of E	Each R	eceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С				,	,			25.0	00
	Name of Employer	Occupation									
	NML	Director									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		250.00								
	Full Name (Last, First, Middle Initial) Mark C Boyle				Data of	Dee	t				
<b>D</b> .	Mailing Address 720 E Wisconsin Ave				Date of			/ Y	Y	Y	7
					05	Ĺ	31		201		
	City	State	Zip Code					2012052			
	Milwaukee	WI	53202-4703	_	Amount	of E	Each R	eceipt th	nis Pe	eriod	_
	FEC ID number of contributing federal political committee.	С			L	,	,			25.0	0
	Name of Employer	Occupation									
	NML Receipt For:	Director									
	Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		250.00								
c.	Full Name (Last, First, Middle Initial)				Date of	Rec	eipt				
	Mailing Address 12877 N Cobblestone Ct				м м 05	/	D D 15	/ Y	201	2	Y
	City	State	Zip Code		Trans	actic	on ID :	2012051	1197	37-84	4
	Mequon	WI	53097-1812	_	Amount	of E	Each R	eceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С				. ,	,		_	30.0	00
	Name of Employer	Occupation									
	NML Receipt For:	VP Div & Ind									
	Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		300.00								
s	UBTOTAL of Receipts This Page (optional)			•						80.0	0
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	EMIZED RECEIPTS		Detailed Summary Page		< 11a		] 11b		11c		12	
	y information copied from such Reports and St for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In											
A.	Full Name (Last, First, Middle Initial) Jennifer L Brase				Date of	f Re	eceip	ot				
	Mailing Address 12877 N Cobblestone Ct				м м 05	1	D	31	/ Y		)12	Y
	City Mequon	State WI	Zip Code 53097-1812	_	Trans Amount		-		012052 ceipt th			ļ
	FEC ID number of contributing federal political committee.	С					,		7	_	30.	00
	Name of Employer NML	Occupation VP Div & In										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00									
в.	Full Name (Last, First, Middle Initial) Michael T. Byrne				Date of	f Re	eceip	ot				
	Mailing Address 395 La Casa Via				м м 05	1	D	л 15	/ Y	ү 20	12	Y
	City Walnut Creek	State CA	Zip Code 94598-4842		Trans Amount				012051 ceipt th			5
	FEC ID number of contributing federal political committee.	С					5		7	_	125.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00									
с.	Full Name (Last, First, Middle Initial) Michael T. Byrne				Date of	f Re	eceip	ot				
	Mailing Address 395 La Casa Via				м м 05	/	D	о 31	/ Y		) 12	Y
	City Walnut Creek	State CA	Zip Code 94598-4842		Trans Amount				<b>012053</b> ceipt th			33
	FEC ID number of contributing federal political committee.	С					,		,	_	125	00
	Name of Employer	Occupation	1									
	Self-Employed	General Ins	surance Agent									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00									
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o		· · · ·				3	-	- 7	-	280.	00
	Inio i onou (last page tills line humber t	····y/·····	▶	-	la de la companya de	1.00	7	1.00		-	1	

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	`	eck only	y on	ie)	_			
			Detailed Summary Page		11a		11b	11c	12	<u> </u>
	ny information copied from such Reports and St for commercial purposes, other than using the									
$\overline{)}$	NAME OF COMMITTEE (In Full)		, r							
$\Big\rangle$	The Northwestern Mutual Life In	surance	Company Federal PAC	2						
A.	Full Name (Last, First, Middle Initial) Susan W Callanan				Date of	f Re	ceipt			
	Mailing Address 2736 N Shepard Ave				м м 05	/	31	) / Y	у у 2012	Y
	City Milwaukee	State WI	Zip Code 53211-3852					<b>2012052</b> leceipt th		
	FEC ID number of contributing federal political committee.	С					9			1.00
	Name of Employer	Occupation		-						
	NML	Director Sta	te Relations							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify)		210.00							
в.	Full Name (Last, First, Middle Initial) Michael G Carter				Date of	f Re	ceipt			
	Mailing Address 7322 N Mohawk Rd				м м 05	/	15	/ Y	_2012	Y
	City	State	Zip Code		Trans	acti	on ID :	2012051	119737-	942
	Fox Point	WI	53217-3454		Amount	t of	Each R	leceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	С				_	, .		8	8.00
	Name of Employer	Occupation								
	NML Receipt For:	Svp & CFO		_						
	Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		880.00							
с.	Full Name (Last, First, Middle Initial) Michael G Carter				Date of	f Re	ceipt			
	Mailing Address 7322 N Mohawk Rd				05	/	31	) / Y	2012	Y
	City Fox Point	State WI	Zip Code 53217-3454				-	2012052		
		VVI	53217-3454		Amount	t of	Each R	leceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	С					J		8	8.00
	Name of Employer	Occupation								
	NML	Svp & CFO								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify)		880.00							
s	UBTOTAL of Receipts This Page (optional)								19	7.00
	OTAL This Period (last page this line number of		r	_				- 7		
			· · · · · · · · · · · · · · · · · · ·				1	7		

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			Detailed Summary Page		11a 13	$\vdash$	11b 14	11c	$\vdash$	12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the							soliciting		ntribut	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PA	С							
A.	Full Name (Last, First, Middle Initial) Greg Castronovo				Date of	Re	eceipt				
	Mailing Address 317 Evening Star Ln				м м 05	/	15			ү 012	Y
	City Bozeman	State MT	Zip Code 59715-7738					2012051 Receipt th			0
	FEC ID number of contributing federal political committee.	С					7		_	42	.00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 420.00	]							
B.	Full Name (Last, First, Middle Initial) Greg Castronovo				Date of	Re	eceipt				
	Mailing Address 317 Evening Star Ln				м м 05	1	31	) / Y		)12	Y
	City Bozeman	State MT	Zip Code 59715-7738					2012053 Receipt th			50
	FEC ID number of contributing federal political committee.	С					7		_	42.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	]							
с.	Full Name (Last, First, Middle Initial) Scott G. Christensen				Date of	Re	eceipt				
	Mailing Address 12 High Meadow Ln				м м 05	/	15			)12	Y
	City Amherst	State NH	Zip Code 03031-2554					2012051 Receipt th			9
	FEC ID number of contributing federal political committee.	C					7		_	125	.00
	Name of Employer	Occupation									
	Self-Employed Receipt For:		surance Agent								
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1250.00	]							
s	UBTOTAL of Receipts This Page (optional)			•			7	· · ·		209.	00
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a 13		11b 14	11c 15	12	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of a	soliciting	contribu	utions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In									
A.	Full Name (Last, First, Middle Initial) Scott G. Christensen				Date of	Re	eceipt			
	Mailing Address 12 High Meadow Ln				м м	1	D ■ D 31	/ Y	у у 2012	Y
	City Amherst	State NH	Zip Code 03031-2554	A			ion ID : 2 Each Re			
	FEC ID number of contributing federal political committee.	С					,			5.00
	Name of Employer Self-Employed	Occupation General Ins	surance Agent							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00	]						
B.	Full Name (Last, First, Middle Initial) Eric P Christophersen				Date of	Re	·			
	Mailing Address N55W21701 Adamdale Dr	State	Zip Code	_ [	05		15		2012	Y
	Menomonee Falls	WI	53051-6272				i <b>on ID : 2</b> Each Re			
	FEC ID number of contributing federal political committee.	С					1	1		9.00
	Name of Employer NML	Occupation Pres & CEC	) Wealth Mgmt							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 690.00	]						
C.	Full Name (Last, First, Middle Initial) Eric P Christophersen				Date of	Re	eceipt			
	Mailing Address N55W21701 Adamdale Dr				м м 05	1	D D 31	/ Y	ү ү 2012	Y
	City Menomonee Falls	State WI	Zip Code 53051-6272	A			ion ID : 2 Each Re			
	FEC ID number of contributing federal political committee.	С					7		6	9.00
	Name of Employer	Occupation	I							
	NML Receipt For:	Pres & CE	O Wealth Mgmt	_						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 690.00	]						
s	UBTOTAL of Receipts This Page (optional)								263	3.00
Т	OTAL This Period (last page this line number	only)								

## SCHEDULE A (FEC Form 3X) \_ \_ \_ \_

FOR LINE NUMBER:

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т	EMIZED RECEIPTS		Use separate schedule(s)	(chec	k only	y on	e)				
			for each category of the Detailed Summary Page		11a 13		11b 14	11c 15	12	1	7
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson fo	r the	purp ntrib	ose of	soliciting	g contrib	utions	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC	)							
Α.	Full Name (Last, First, Middle Initial) David D Clark			D	ate of	Re	ceipt				
	Mailing Address 923 E Kilbourn Ave			1	м м 05	1	15	/ Y	2012	Y	
	City Milwaukee	State WI	Zip Code 53202-3493		Trans		on ID : 2		1119737- nis Perio		
	FEC ID number of contributing federal political committee.	С					7		14	1.00	
	Name of Employer	Occupation									
	NML	Svp Real Es	state	_							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1410.00								
— B	Full Name (Last, First, Middle Initial) David D Clark			D	ate of	Be	ceipt				
	Mailing Address 923 E Kilbourn Ave				05	/	31	/ Y	2012	Y	
	City Milwaukee	State WI	Zip Code 53202-3493						91986-6		
	FEC ID number of contributing federal political committee.	C	55202-5495		mount	: of	Each Re	eceipt tr	nis Perio 14	d 1.00	]
	Name of Employer NML	Occupation Svp Real Es									
	Receipt For:		Year-to-Date ▼	-							
	Primary General Other (specify) ▼		1410.00								
с.	Full Name (Last, First, Middle Initial) R. Michael Condrey			D	ate of	Re	ceipt				
	Mailing Address 907 Williamson Dr				м м 05	/	D D 15	/ Y	y y 2012	Y	
	City Raleigh	State NC	Zip Code 27608-2307						1519751-		
	FEC ID number of contributing federal political committee.	C	210062307		mount	: of	Each Re	eceipt th	nis Perio 20	d 8.00	]
	Name of Employer	Occupation									
	Self-Employed	General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
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			Detailed Summary Page		11a 13	$\vdash$	11b 14		11c	12	17
	y information copied from such Reports and St for commercial purposes, other than using the				or the		pose		soliciting	g contrib	utions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In								un suu		
	Full Name (Last, First, Middle Initial) R. Michael Condrey				Date of	f Re	eceipt				
	Mailing Address 907 Williamson Dr				м м 05	/	3	D 1	/ Y	2012	Y
	City Raleigh	State NC	Zip Code 27608-2307							119524 iis Perio	
	FEC ID number of contributing federal political committee.	С					7			20	8.00
	Name of Employer	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
B.	Full Name (Last, First, Middle Initial) Tait Cruse				Date of	f Re	eceipt				
	Mailing Address 2961 Belclaire Dr	Otota	Zio Codo		м м 05	/		5	/ Y	2012	
	City Frisco	State TX	Zip Code 75034-5969							<u>519751-</u> iis Perio	
	FEC ID number of contributing federal political committee.	С					7		7	20	8.00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
с.	Full Name (Last, First, Middle Initial)				Date of	f Re	eceipt				
	Mailing Address 2961 Belclaire Dr				м м 05	/	3	D 31	/ Y	2012	Y
	City Frisco	State TX	Zip Code 75034-5969	A						<b>119524</b> iis Perio	
	FEC ID number of contributing federal political committee.	С					7				08.00
	Name of Employer	Occupation									
	Self-Employed Receipt For:		surance Agent	_							
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
S	UBTOTAL of Receipts This Page (optional)						7		- 7	62	4.00
т	OTAL This Period (last page this line number of	only)	••••••	. [			7				

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

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		Detailed Summary Page		11a 13	$\vdash$	11b 14	11c 15		12 16	17
Any information copied from such Reports and or for commercial purposes, other than using th				or the		pose of :	soliciting		ntribut	ions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	C							
Full Name (Last, First, Middle Initial) A. Brian R. Cunningham Mailing Address 6251 S Billings Way				Date of	Re	· .				
City	State	Zip Code		05 <b>T</b> rana		15 ion ID : 2	/ Y	20	)12 754 3	Ŷ
Centennial	CO	80111-6009				Each Re				
FEC ID number of contributing federal political committee.	С				_	,	,	_	50.	00
Name of Employer Self-Employed	Occupation General Ins	urance Agent								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00								
Full Name (Last, First, Middle Initial) B. Brian R. Cunningham				Date of	Re	eceipt				
Mailing Address 6251 S Billings Way				м м 05	1	31	/ Y		12	Y
City Centennial	State CO	Zip Code 80111-6009				i <b>on ID : 2</b> Each Re				81
FEC ID number of contributing federal political committee.	С					л. Л.	7	_	50.	00
Name of Employer Self-Employed	Occupation General Ins	urance Agent								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00								
Full Name (Last, First, Middle Initial) C. Jefferson V De Angelis	l			Date of	Re	eceipt				
Mailing Address 4449 W Donges Bay Rd				м м 05	/	D D 15	/ Y		) 12	Y
City Mequon	State WI	Zip Code 53092-4883				ion ID : 2 Each Re				55
FEC ID number of contributing federal political committee.	С					,			208	00
Name of Employer NML	Occupation President N									
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 2080.00								
SUBTOTAL of Receipts This Page (optional)		· · · · · · · · · · · · · · · · · · ·				7	7		308.0	00

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			Detailed Summary Page		11a 13		11b 14	11		12	17
	y information copied from such Reports and St for commercial purposes, other than using the			or the		pose of	solici	iting c	ontribut	tions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In										
<b>A</b> .	Full Name (Last, First, Middle Initial) Jefferson V De Angelis Mailing Address 4449 W Donges Bay Rd				Date of		eceipt	D /	Y	Y Y	Y
	City Mequon	State WI	Zip Code 53092-4883				31 <u>ion ID :</u> Each F		05291		5
	FEC ID number of contributing federal political committee. Name of Employer NML	Occupation President M					7			208	.00
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
B.	Full Name (Last, First, Middle Initial) Lew D. Derrickson Mailing Address 5799 Sunset Ln			[	Date of	Re	eceipt		Y	y y y	Y
	City Indianapolis	State IN	Zip Code 46228-1447		Trans		i <b>on ID :</b> Each F	2012	05151	9751-7	
	FEC ID number of contributing federal political committee.	Occupation					7		,	208	.00
	Self-Employed Receipt For: Primary General Other (specify) ▼	General Ins	urance Agent Year-to-Date ▼ 2080.00	]							
C.	Full Name (Last, First, Middle Initial)         Lew D. Derrickson         Mailing Address 5799 Sunset Ln				Date of	Re	D I			Y Y	Y
	City Indianapolis	State IN	Zip Code 46228-1447				31 ion ID : Each F	2012	05311		7
	FEC ID number of contributing federal political committee.	С					7		,	208	.00
	Name of Employer	Occupation									
	Self-Employed Receipt For:		surance Agent Year-to-Date ▼								
	Primary General Other (specify) ▼	Aggregate	2080.00								
s	UBTOTAL of Receipts This Page (optional)		•••••				3		,	624.	00
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PAGE 22 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	47
Any information copied from such Reports and a or for commercial purposes, other than using the			erson for th		pose of		contribu	
NAME OF COMMITTEE (In Full)								
The Northwestern Mutual Life I	nsurance	Company Federal PA	С					
Full Name (Last, First, Middle Initial) A			Date	of R	eceipt			
Mailing Address 2389 New Stone Ridge Rd			05		15	/ Y	2012	Y
City	State	Zip Code				2012051		3
Ripley	WV	25271-5173	Amou	unt of	Each R	leceipt th	is Period	l
FEC ID number of contributing federal political committee.	С				3		25	5.00
Name of Employer	Occupation	1						
Self-Employed	General Ins	surance Agent						
Receipt For:	Aggregate	Year-to-Date <b>V</b>						
Primary General		250.00	11					
Other (specify)		200.00						
Full Name (Last, First, Middle Initial) B. James S. Dobbs	1		Data	of D	aggint			
Mailing Address 2389 New Stone Ridge Rd					eceipt		Y Y	V
Maining Address 2369 New Stone Ridge Ru			05		31	/ Ү	2012	Y
City	State	Zip Code				2012053 <sup>-</sup>		.3
Ripley	WV	25271-5173	Amou	unt of	Each R	leceipt th	is Period	
FEC ID number of contributing federal political committee.	С				,	<b>y</b>	25	.00
Name of Employer	Occupation	1						
Self-Employed	General Ins	urance Agent						
Receipt For:	Aggregate	Year-to-Date <b>V</b>						
Primary General Other (specify) ▼		, 250.00	]					
Full Name (Last, First, Middle Initial) C. Paul Dodd			Date	of R	eceipt			
Mailing Address 7078 E Genesee St			0		15		ууу 2012	Y
City	State	Zip Code	Tra	nsac	tion ID :	2012051	519751-3	36
Fayetteville	NY	13066-1123	Amou	unt of	Each R	leceipt th	is Period	
FEC ID number of contributing federal political committee.	С				,		208	3.00
Name of Employer	Occupation							
Self-Employed	General Ins	surance Agent						
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify)		2080.00	1					
• · · · · · · · · · · · · · · · ·		/J /J /J						
SUBTOTAL of Receipts This Page (optional)					7	7	258	.00
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PAGE 23 OF

IТ	EMIZED RECEIPTS		Use separate schedule(s)	(che	ck onl	y or	ne)				
			for each category of the Detailed Summary Page	X	11a 13		11b	11c	12		17
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements ma	ay not be sold or used by any p ddress of any political committee	erson fo e to soli	or the	purp ntrib	oose of	soliciting	g contrib	oution iittee.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С							
Α.				C	ate o	f Re	ceipt				
	Mailing Address 7078 E Genesee St			1	м м 05	/	31	/ Y	2012		
	City Fayetteville	State NY	Zip Code 13066-1123		Trans		on ID :	<b>2012053</b> eceipt th	8119524	1-36	-
	FEC ID number of contributing federal political committee.	С					7	- 7	20	08.00	
	Name of Employer	Occupation									
	Self-Employed	General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
B	Full Name (Last, First, Middle Initial) Mark G Doll				ate o	f Re	ceint				
0.	Mailing Address 8420 N Pelican Ln			_	м м 05		15	/ Y	2012	Y	
	City River Hills	State WI	Zip Code 53217-2058				-	<b>2012051</b> eceipt th	119737		
	FEC ID number of contributing federal political committee.	С					7	- 7	20	08.00	
	Name of Employer NML	Occupation EVP & CIO		_							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
<u></u> с.	Full Name (Last, First, Middle Initial) Mark G Doll				ate o	f Re	ceipt				
	Mailing Address 8420 N Pelican Ln			_	м м 05		31	/ Y	2012	Y	
	City River Hills	State WI	Zip Code 53217-2058					2012052 eceipt th			
	FEC ID number of contributing federal political committee.	С			inoun					08.00	
	Name of Employer	Occupation									
	NML	EVP & CIO									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
	UBTOTAL of Receipts This Page (optional)				-		7	7	62	24.00	7
ΓĨ	<b>OTAL</b> This Period (last page this line number	oniy)	•••••••	۰ L			7		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		_

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance Company Federal PA	2
Full Name (Last, First, Middle Initial) A. Steven Dugal Mailing Address 9 Falcon Dr City Mandeville FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For:	State Zip Code LA 70471-2952 C Occupation General Insurance Agent	Date of Receipt
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2080.00	
Full Name (Last, First, Middle Initial) B. Steven Dugal Mailing Address 9 Falcon Dr City Mandeville FEC ID number of contributing	State Zip Code LA 70471-2952	Date of Receipt 05 31 2012 Transaction ID : 20120531195241-37 Amount of Each Receipt this Period
federal political committee.          Name of Employer         Self-Employed         Receipt For:         Primary       General         Other (specify) ▼	C Occupation General Insurance Agent Aggregate Year-to-Date ▼ 2080.00	
Full Name (Last, First, Middle Initial) C. John E Dunn Mailing Address N71W31034 Lower Club C City	ir W State Zip Code	Date of Receipt 05 / 15 / 2012 Transaction ID : 2012051119737-607
Hartland         FEC ID number of contributing federal political committee.         Name of Employer         NML         Receipt For:         Primary       General         Other (specify) ▼	WI 53029-8716 C Occupation VP & Ipas Cnsl Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 40.00
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	456.00
TOTAL This Period (last page this line numb	er only)	

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ITEMIZED RECEIPTS			Detailed Summary Page		11a		11b		11c		12	_	
Any information conied from such Reports and Statements may					13		14		15		16		17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any po address of any political committee	erson e to so	for the licit co	pur ntrib	pose c outions	of so fror	oliciting m such	cor 1 CO	ntribut mmitt	ions ee.	
$\backslash$	NAME OF COMMITTEE (In Full)			_									
	The Northwestern Mutual Life In	surance	Company Federal PA	C									
Α.	Full Name (Last, First, Middle Initial) John E Dunn				Date o	f Re	eceipt						
	Mailing Address N71W31034 Lower Club Cir W				м м 05	/	31		/ Y		ү 012	Y	
	City	State	Zip Code		Trans	sacti	ion ID	: 20	12052	9198	86-60	7	
	Hartland	WI	53029-8716		Amoun	t of	Each	Rec	eipt thi	is P	eriod		
	FEC ID number of contributing federal political committee.	С					7		7	_	40	.00	
	Name of Employer	Occupation	1										
	NML	VP & Ipas (	Cnsl										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		400.00										
в.	Full Name (Last, First, Middle Initial) James R. Effner Jr.				Date o	f Re	eceipt						
	Mailing Address 2520 Hanford Ln				м м 05	/	D 15		/ Y		) 12	Y	
	City	State	Zip Code		Trans	acti	ion ID	: 20	120515	5197	751-4 <sup>°</sup>	1	
	Aurora	IL	60502-6969		Amoun	t of	Each	Rec	eipt thi	is P	eriod		
	FEC ID number of contributing federal political committee.	С					7		7	_	150.	00	
	Name of Employer	Occupation	1										
	Self-Employed	General Ins	urance Agent										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		, 1500.00										
С.	Full Name (Last, First, Middle Initial) James R. Effner Jr.				Date o	f Re	eceipt						
	Mailing Address 2520 Hanford Ln				<sup>M</sup> M	J.	D 3 <sup>,</sup>	1	/ Y	20	)12		
	City	State IL	Zip Code 60502-6969	-					012053			41	
	Aurora	IL	00002-0909		Amoun	t of	Each	Rec	eipt thi	is P	eriod		
	FEC ID number of contributing federal political committee.	С				_	7	_	7	_	150	.00	
	Name of Employer	Occupation	1										
	Self-Employed	General Ins	surance Agent										
	Receipt For:	Aggregate	Year-to-Date <b>V</b>										
	Primary General		1500.00	1									
	Other (specify)		1300.00										
s	UBTOTAL of Receipts This Page (optional)						,		7	_	340.	00	
т	OTAL This Period (last page this line number of	only)		•			,		7	Ξ			

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(che	eck onl	ly or	ne)				
			for each category of the Detailed Summary Page		11a 13		11b 14	11c 15	12	Г	17
	y information copied from such Reports and St for commercial purposes, other than using the				or the		oose of	soliciting	g contril		าร
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С							
Α.	Full Name (Last, First, Middle Initial) Ralph David Ells Mailing Address 9927 N Valley Hill D				Date o		· .				_
	Maining Address 9927 N Valley Hill D				м м 05		15	/ Y	2012		
	City Mequon	State WI	Zip Code 53092					<b>2012051</b> eceipt th			
	FEC ID number of contributing federal political committee.	С					7			38.00	
	Name of Employer	Occupation									
	NML	Managing D	Director								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	1							
в.	Full Name (Last, First, Middle Initial)				Date o	f Re	ceipt				
	Mailing Address 9927 N Valley Hill D				м м 05	/	31	/ Y	2012	Y	]
	City Mequon	State WI	Zip Code 53092				-	<b>2012052</b> eceipt th			
	FEC ID number of contributing federal political committee.	С					,	7	÷	38.00	
	Name of Employer NML	Occupation Managing D									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary     General       Other (specify) ▼		380.00								
<u>с.</u>	Full Name (Last, First, Middle Initial) Keith A. Erhard				Date o	f Re	ceipt				
	Mailing Address 4807 Timberwood Ct				м м 05	/	D D 15	/ Y	2012	Y	]
	City West Des Moines	State IA	Zip Code 50265-5447					2012051 eceipt th			
	FEC ID number of contributing federal political committee.	С					,			42.00	)
	Name of Employer	Occupation		_							
	Self-Employed	General Ins	urance Agent								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_							
	Other (specify) ▼		420.00								
s	UBTOTAL of Receipts This Page (optional)			•			7		11	18.00	
т	OTAL This Period (last page this line number of	only)		•			,				

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171			Use separate schedule(s)	(ch	ieck only	one	e)	L			
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>&lt;</b> 11a		11b	11c	12	Г	
	y information copied from such Reports and St for commercial purposes, other than using the					purpo				butio	
	NAME OF COMMITTEE (In Full)										
$\rangle$	The Northwestern Mutual Life In	surance	Company Federal PAC	2							
Α.	Full Name (Last, First, Middle Initial) Keith A. Erhard				Date of	Rec	eipt				
	Mailing Address 4807 Timberwood Ct				05	/	D D D	/ Y	2012		1
	City	State	Zip Code		Trans	actio	on ID : 2	2012053			5
	West Des Moines	IA	50265-5447	_	Amount	of E	ach Re	eceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С				,		,		42.0	0
	Name of Employer	Occupation		-							
	Self-Employed	General Ins	urance Agent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify)		420.00								
B	Full Name (Last, First, Middle Initial) John C. Ertz				Date of	Bec	oint				
υ.	Mailing Address 18235 Shaker Blvd				05	/	15	/ Y	_2012		1
	City	State	Zip Code			actio		012051			
	Shaker Heights	ОН	44120-1754		Amount	of E	ach Re	eceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С				,		9		70.00	)
	Name of Employer	Occupation									
	Self-Employed	General Insu	urance Agent								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		, 700.00								
с.	Full Name (Last, First, Middle Initial)				Date of	Rec	eipt				
	Mailing Address 18235 Shaker Blvd				м м 05	/	31	/ Y	2012		1
	City	State	Zip Code		Trans	actio	on ID : 2	2012053	119524	41-24	ļ.
	Shaker Heights	OH	44120-1754	_	Amount	of E	ach Re	eceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С				,		7		70.0	0
	Name of Employer	Occupation									
	Self-Employed	General Ins	urance Agent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		700.00								
s	UBTOTAL of Receipts This Page (optional)		••••••	•		,		- 7	18	82.00	)
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		Use separate schedule(s)	(check d	only o	ne)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b 14	11c 15	12 16	17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements ma	ay not be sold or used by any pe ddress of any political committee	rson for th	ne pur contrit	pose of	soliciting	g contribu	itions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PAC	;					
Full Name (Last, First, Middle Initial) A. Christina H Fiasca			Date	of Re	eceipt			
Mailing Address 9230 N Fairway Dr					15	/ Y	2012	Y
City Bayside	State WI	Zip Code 53217-1317			tion ID :		<b>119737-8</b> nis Perioc	
FEC ID number of contributing federal political committee.	С				7		102	2.00
Name of Employer	Occupation							
NML	Svp Agency	/ Svcs	_					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1020.00						
Full Name (Last, First, Middle Initial)				( )				
B. Christina H Fiasca Mailing Address 9230 N Fairway Dr			Date	M /	eceipt 31	/ Y	2012	Y
City	State	Zip Code				2012052	91986-88	34
Bayside	WI	53217-1317	Amo	unt of	Each R	eceipt th	nis Perioc	I
FEC ID number of contributing federal political committee.	С				7		102	2.00
Name of Employer NML	Occupation		_					
Receipt For:	Svp Agency		_					
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1020.00						
Full Name (Last, First, Middle Initial) C. John E. Fobes II			Date	of Re	eceipt			
Mailing Address 1638 Del Dayo Dr			M 0:		D D 15	/ Y	ү ү 2012	Y
City Carmichael	State CA	Zip Code 95608-6052					519751-	
FEC ID number of contributing federal political committee.	C		_ Amo	unt of	Each R	eceipt tr	nis Perioc 208	1 3.00
Name of Employer	Occupation		-					
Self-Employed	General Ins	surance Agent						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00						
SUBTOTAL of Receipts This Page (optional)					л і л і	5	412	.00

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

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PAGE 29 OF

			Detailed Summary Page		11a 13		11b	11c		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	solicitiną		ntribut	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life II	nsurance	Company Federal PA	С							
A.	Full Name (Last, First, Middle Initial) John E. Fobes II				Date of	Re	eceipt				
	Mailing Address 1638 Del Dayo Dr				м м 05	/	31	/ Y		у 012	Y
	City Carmichael	State CA	Zip Code 95608-6052				ion ID : 2 Each Re			-	28
	FEC ID number of contributing federal political committee.	С					5		_	208	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00	]							
B.	Full Name (Last, First, Middle Initial) Lee M. Fortenberry				Date of	Re	eceipt				
	Mailing Address 207 Brook Meadow Dr				м м 05	1	D D 15	/ Y	2(	)12	Y
	City Mechanicsburg	State PA	Zip Code 17050-3139				ion ID : 2 Each Re				1
	FEC ID number of contributing federal political committee.	С					7		_	42.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	]							
с.	Full Name (Last, First, Middle Initial) Lee M. Fortenberry				Date of	Re	eceipt				
	Mailing Address 207 Brook Meadow Dr				м м 05	/	D D 31	/ Y		) 12	Y
	City Mechanicsburg	State PA	Zip Code 17050-3139				ion ID : Each Re				51
	FEC ID number of contributing federal political committee.	С					<u>т</u>		_	42	.00
	Name of Employer	Occupation									
	Self-Employed	General Ins	surance Agent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify)		420.00								
s	UBTOTAL of Receipts This Page (optional)						7			292.	00
т	OTAL This Period (last page this line number	only)					-				

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

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PAGE 30 OF

			Detailed Summary Page		11a 13		11b 14	11c	$\vdash$	12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the							soliciting			ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	isurance	Company Federal PA	С							
<b>A</b> .	Full Name (Last, First, Middle Initial) Lance P. Franczyk				Date of		eceipt				
	Mailing Address 2224 E 24th St				м м 05		15		2(	ү 012	Y
	City Tulsa	State OK	Zip Code 74114-2912					2012051 Receipt th			3
	FEC ID number of contributing federal political committee.	С					7	7	_	75	.00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	]							
в.	Full Name (Last, First, Middle Initial) Lance P. Franczyk				Date of	Re	eceipt				
	Mailing Address 2224 E 24th St				м м 05	/	31			)12	Y
	City Tulsa	State OK	Zip Code 74114-2912					2012053 Receipt th			53
	FEC ID number of contributing federal political committee.	С					7	- 7	_	75.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	]							
с.	Full Name (Last, First, Middle Initial) Robert T. Frieling				Date of	Re	eceipt				
	Mailing Address 5 Gennaro Cir				м м 05	/	15			)12	Y
	City Wayland	State MA	Zip Code 01778-4436					: <b>2012051</b> Receipt th			3
	FEC ID number of contributing federal political committee.	С					7	- 7		125	.00
	Name of Employer	Occupation									
	Self-Employed Receipt For:		surance Agent								
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1250.00	]							
s	UBTOTAL of Receipts This Page (optional)						7	1 1	-	275.	00
Т	OTAL This Period (last page this line number of	only)		•			7		_		

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17			Use separate schedule(s)	(cł	neck on	ly o	ne)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>X</b> 11a 13		11b 14	11c	12	Г	17
	ny information copied from such Reports and for commercial purposes, other than using th				for the		pose of	solicitin	g contri	butio	ons
	NAME OF COMMITTEE (In Full)										
	The Northwestern Mutual Life	Insurance	Company Federal PA	С							
Α.	V				Date c	of Re	eceipt				
	Mailing Address 5 Gennaro Cir				M N	1 /	31	Y / C	2012		
	City Wayland	State MA	Zip Code 01778-4436	_				201205 Receipt t			3
	FEC ID number of contributing federal political committee.	С					7	7	1	25.0	0
	Name of Employer	Occupation	l								
	Self-Employed	General Ins	surance Agent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		1250.00	11							
	Other (specify)		7 7 7								
В.	Full Name (Last, First, Middle Initial) Sheila M Gavin				Date c	of Re	eceipt				
	Mailing Address 5735 N Crestwood Blvd				05	/	15		_2012		1
	City	State	Zip Code			sact		201205 <sup>-</sup>			)8
	Glendale	WI	53209-4309					Receipt t			
	FEC ID number of contributing federal political committee.	С					7			27.0	0
	Name of Employer NML	Occupation									
	Receipt For:	1	& Ast Sec/Ins								
	Primary General	Aggregate	Year-to-Date ▼	_							
	Other (specify) ▼		270.00								
<u> </u>	Full Name (Last, First, Middle Initial) Sheila M Gavin				Date c	of Re	eceipt				
	Mailing Address 5735 N Crestwood Blvd				M N 05	1 /	31		2012		1
	City	State	Zip Code		Tran	sact	tion ID :	201205			в
	Glendale	WI	53209-4309		Amour	nt of	Each F	Receipt t	his Peri	od	
	FEC ID number of contributing federal political committee.	С					5	5		27.0	0
	Name of Employer	Occupation	l								
	NML	Ast Gn Cnl	& Ast Sec/Ins								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		270.00								
	Other (specify)		270.00								
┢	SUBTOTAL of Receipts This Page (optional)			>	Ľ.	-	7		17	79.00	)
11	TOTAL This Period (last page this line numbe	r only)	••••••	•	Last.		7		-		- I

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

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			Detailed Summary Page		X	11a		11b	11c		12		
	information partial from such Departure 10					13		14	15		16		17
	hy information copied from such Reports and S for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	nsurance	Company Federal PAC	2									
Α.					D	Date of	Re	eceipt					
	Mailing Address 1610 N Prospect Ave				I	м м 05	1	15			2012	Y	
	City Milwaukee	State WI	Zip Code 53202-2491	_				-	: 201205 Receipt			13	
	FEC ID number of contributing federal political committee.	С			l			, .		_	25.	.00	
	Name of Employer NML	Occupation Ast Gn Cnl	& Ast Sec-Tax										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00										
В.	Full Name (Last, First, Middle Initial) Chris K Gawart				D	Date of	Re	eceipt					
	Mailing Address 1610 N Prospect Ave				l	м м 05	/	D 31		y y 2	012	Y	
	City Milwaukee	State WI	Zip Code 53202-2491	$\vdash$					201205			3	
	FEC ID number of contributing federal political committee.	С			A	rmount	OT	Each I	Receipt	inis i	25.	00	
	Name of Employer NML	Occupation Ast Gn Cnl	& Ast Sec-Tax										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00										
<u>с</u> .	Full Name (Last, First, Middle Initial) Timothy J Gerend				D	Date of	Re	eceipt					
	Mailing Address 5421 N Idlewild Ave				l	м м 05	/	D 15			012	Y	
	City Whitefish Bay	State WI	Zip Code 53217-5331						: <b>20120</b> Receipt			00	
	FEC ID number of contributing federal political committee.	С			l			<b>7</b>		_	64	.00	
	Name of Employer	Occupation	1										
	NML	VP Complia	ance/Bp										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)		640.00										
s	UBTOTAL of Receipts This Page (optional)		•		[			7			114.	00	]
Г	OTAL This Period (last page this line number	only)		•				7					

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

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			Detailed Summary Page		-		11b	11c		12	
An	y information copied from such Reports and S	ay not be sold or used by any p	erson f	13 for the	 puri	14 pose of	15 soliciting		16 htribut	17 ions	
or	for commercial purposes, other than using the										
$\backslash$	NAME OF COMMITTEE (In Full)		Company Foderal DA	~							
	The Northwestern Mutual Life I	nsurance	Company Federal PAG								
^	Full Name (Last, First, Middle Initial) Timothy J Gerend										
Α.	Mailing Address 5421 N Idlewild Ave				Date of		ceipt		V	Y	V
					05	ĺ	31	, , <sub>1</sub>		)12	T
	City	State WI	Zip Code					2012052			D
	Whitefish Bay	VVI	53217-5331		Amount	of	Each F	Receipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	,		_	64.	00
	Name of Employer	Occupation									
	NML	VP Complia	ince/Bp								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_							
	Other (specify) ▼		640.00								
	Full Name (Last, First, Middle Initial) Mitchell B. Glover				Date of	Re	eceipt				
	Mailing Address 6700 Old Darby Trl NE				M M	/	D I I	) / Y	Y	Y	Y
	01	01-1-	7		05		15			12	
	City Ada	State MI	Zip Code 49301-8360					2012051			
	FEC ID number of contributing			'	Amoum	. 01		Receipt th	15 F	enou	
	federal political committee.	С					7	7	_	208.	00
	Name of Employer Self-Employed	Occupation									
	Receipt For:		urance Agent	_							
	Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)	L	2080.00								
c.	Full Name (Last, First, Middle Initial) Mitchell B. Glover				Date of	Re	eceipt				
	Mailing Address 6700 Old Darby Trl NE				м м 05	1	D 31	) / Y		) 12	Y
	City Ada	State MI	Zip Code 49301-8360					2012053			21
		IVII	49301-0300		Amount	of	Each F	Receipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	,		_	208	.00
	Name of Employer	Occupation									
	Self-Employed	General Ins	surance Agent	_							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		2080.00								
s	UBTOTAL of Receipts This Page (optional)								Ξ	480.	00
-				-		-	7		=		
T	OTAL This Period (last page this line number	only)	•••••••••••••••••••••••••••••••••••••••	•			7		_		

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

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TEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 17
or for commercial purposes, other than using t	Statements may not be sold or used by any phe name and address of any political committee	person for the purpose of soliciting contributions et a solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		<u>_</u>
I he Northwestern Mutual Life	Insurance Company Federal PA	
Full Name (Last, First, Middle Initial) <b>A.</b> Kimberley Goode		Date of Receipt
Mailing Address 2485 W Fairy Chasm Rd		05 15 2012
City	State Zip Code	Transaction ID : 2012051119737-547
River Hills	WI 53217-1536	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	63.00
Name of Employer	Occupation	
NML	VP Comm	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	630.00	]
Full Name (Last, First, Middle Initial) B. Kimberley Goode	1	Date of Receipt
Mailing Address 2485 W Fairy Chasm Rd		05 31 2012
City	State Zip Code	Transaction ID : 201205291986-547
River Hills	WI 53217-1536	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	63.00
Name of Employer NML	Occupation VP Comm	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	]
Full Name (Last, First, Middle Initial) C. Patrick K. Gores	1	Date of Receipt
Mailing Address 2702 28th Ave S		05 15 / Y Y Y Y 05 2012
City	State Zip Code	Transaction ID : 2012051519751-13
Fargo	ND 58103-5045	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Self-Employed	General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify)	500.00	-
SUBTOTAL of Receipts This Page (optional).	•	176.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	y information copied from such Reports and s for commercial purposes, other than using th			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PA	C
Α.	Full Name (Last, First, Middle Initial) Patrick K. Gores			Date of Receipt
	Mailing Address 2702 28th Ave S			M = M         /         D = D         /         Y = Y = Y         Y           05         31         2012
	City	State ND	Zip Code 58103-5045	Transaction ID : 20120531195241-13
	Fargo		56105-5045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer	Occupation	1	
	Self-Employed	General Ins	surance Agent	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		500.00	]
в.	Full Name (Last, First, Middle Initial) Tom Goris Jr.			Date of Receipt
	Mailing Address 8042 Cheverny Dr			05 15 2012
	City	State	Zip Code	Transaction ID : 2012051519751-34
	Mequon	WI	53097-2532	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer Self-Employed	Occupation General Ins	n surance Agent	_
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		, 1250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Tom Goris Jr.			Date of Receipt
	Mailing Address 8042 Cheverny Dr			05 31 2012
	City Mequon	State WI	Zip Code 53097-2532	Transaction ID : 20120531195241-34 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer	Occupation	1	-
	Self-Employed	General Ins	surance Agent	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1250.00	1
	Other (specify)		1250.00	
s	UBTOTAL of Receipts This Page (optional)			300.00
т	OTAL This Period (last page this line number	only)		

FOR LINE NUMBER:

(check only one)

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	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	and Statements may not be sold or used by any pe ng the name and address of any political committee	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	fe Insurance Company Federal PAC	;
Full Name (Last, First, Middle Initial) A. John M Grogan Mailing Address 7860 N Club Cir		Date of Receipt
City	State Zip Code	05 15 2012 Transaction ID : 2012051119737-983
Fox Point	WI 53217-2939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation Svp Fin Plng & Prod Deliv	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) B. John M Grogan		Date of Receipt
Mailing Address 7860 N Club Cir		05 31 2012
City Fox Point	StateZip CodeWI53217-2939	Transaction ID : 201205291986-983 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer NML	Occupation Svp Fin PIng & Prod Deliv	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Thomas C Guay		Date of Receipt
Mailing Address W73N377 Mulberry Ave		05 15 2012
City Cedarburg	State Zip Code WI 53012-2648	Transaction ID : 2012051119737-620 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	68.00
Name of Employer	Occupation	-
NML	VP-New Business	_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 680.00	
	al)   mber only)	268.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)								
11			for each category of the Detailed Summary Page		1a 3	11b 14	11c	12	17			
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any poddress of any political committee	erson for	the p	urpose o	f soliciting	g contrib	utions			
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С								
A.	Full Name (Last, First, Middle Initial) Thomas C Guay			Da	te of I	Receipt						
	Mailing Address W73N377 Mulberry Ave			M	05	/ 0		2012	Y			
	City Cedarburg	State WI	Zip Code 53012-2648		ransa	ction ID	: 2012052 Receipt th	291986-6				
	FEC ID number of contributing federal political committee.	С				7		6	8.00			
	Name of Employer	Occupation										
	NML Receipt For:	VP-New Bu		_								
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 680.00	1								
_	Full Name (Last, First, Middle Initial)											
в.	Stephen T. Guinan Mailing Address 126 Waverly Cir				te of I	Receipt		2012	■ Y			
	City	State	Zip Code	Т			2012051		48			
	Phoenixville	PA	19460-2500	Am	nount o	of Each I	Receipt th	nis Perio	d			
	FEC ID number of contributing federal political committee.	С				7		4	2.00			
	Name of Employer Self-Employed	Occupation										
	Receipt For:		urance Agent	_								
	Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 420.00	1								
— с.	Full Name (Last, First, Middle Initial) Stephen T. Guinan			Da	te of I	Receipt						
	Mailing Address 126 Waverly Cir			M	м 05	/ D 31		2012	Y			
	City Phoenixville	State PA	Zip Code 19460-2500				: 2012053					
	FEC ID number of contributing federal political committee.	С		Am	iount (	of Each I	Receipt th		d 12.00			
	Name of Employer	Occupation										
	Self-Employed	General Ins	surance Agent									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	1								
	UBTOTAL of Receipts This Page (optional)				-	7		15	2.00			
ΙT	<b>OTAL</b> This Period (last page this line number of	only)	••••••	· L				_				

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		Detailed Summary Page	×	11a		11b	11c	12	<b>—</b> 4-
Any information copied from such Reports and Si									
or for commercial purposes, other than using the	name and a	ddress of any political committee	e to sol	icit cor	ntrib	utions fr	rom such	commit	tee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С						
/ Full Name (Last, First, Middle Initial) <b>A. Kevin J. Hassan</b>				Date of	Rei	ceint			
Mailing Address 804 Montparnasse Pl				M M	_	D D	/ Y	Y Y	Y
City	State	Zip Code		05 Trans	acti	15 on ID - 1	2012051	2012 519751-2	2
Newtown Sq	PA	19073-2623	A					is Period	
FEC ID number of contributing federal political committee.	С					,	7	125	.00
Name of Employer	Occupation								
Self-Employed Receipt For:		urance Agent	_						
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00							
Full Name (Last, First, Middle Initial) B. Kevin J. Hassan				Date of	Re	ceipt			
Mailing Address 804 Montparnasse Pl				м м 05	/	31	/ Y	y y 2012	Y
City	State	Zip Code		Transa	actio	on ID : 2	2012053 <sup>.</sup>	1195241-	22
Newtown Sq	PA	19073-2623	A	Amount	of	Each R	eceipt th	is Period	
FEC ID number of contributing federal political committee.	С					,	7	125	.00
Name of Employer Self-Employed	Occupation General Ins	urance Agent							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1250.00	]						
Full Name (Last, First, Middle Initial) C. Mark J. Heurung				Date of	Re	ceipt			
Mailing Address 18621 Saint Mellion Pl				м м 05	/	15	/ Y	2012	Y
City	State	Zip Code		Trans	acti	on ID :	2012051	519751-4	17
Eden Prairie	MN	55347-3484	A	Amount	of	Each R	eceipt th	is Period	
FEC ID number of contributing federal political committee.	С					,		208	8.00
Name of Employer	Occupation		_						
Self-Employed	General Ins	urance Agent							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		2080.00							
SUBTOTAL of Receipts This Page (optional)								458	.00
TOTAL This Period (last page this line number of						7			

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TIEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	I orts and Statements may not be sold or used by any per- using the name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutua	I Life Insurance Company Federal PAC	2
Full Name (Last, First, Middle Initial) A. Mark J. Heurung		Date of Receipt
Mailing Address 18621 Saint Mellion	Pl State Zip Code	05 / 05 / Y Y Y Y 05 / 31 2012
Eden Prairie	MN 55347-3484	Transaction ID : 20120531195241-47           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	208.00
Name of Employer Self-Employed	Occupation General Insurance Agent	_
Receipt For:	Aggregate Year-to-Date ▼	_
Other (specify) ▼	2080.00	
Full Name (Last, First, Middle Initial) B. Gary M Hewitt		Date of Receipt
Mailing Address 2045 Elm Tree Rd		05 15 2012
City Elm Grove	StateZip CodeWI53122-1117	Transaction ID : 2012051119737-879 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer NML	Occupation VP Treas & Inv Ops	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	
Full Name (Last, First, Middle Initial) C. Gary M Hewitt		Date of Receipt
Mailing Address 2045 Elm Tree Rd		05 31 2012
City Elm Grove	StateZip CodeWI53122-1117	Transaction ID : 201205291986-879 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer	Occupation	_
NML	VP Treas & Inv Ops	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	780.00	
SUBTOTAL of Receipts This Page (or	otional)	364.00
TOTAL This Period (last page this line	e number only)	

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ITEMIZED RECEIPTS	tor each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance Company Federal F	YAC
Full Name (Last, First, Middle Initial) A. Steve H. Holter		Date of Receipt
Mailing Address 11390 N Creekside Ct	State Zip Code	05 15 2012
Mequon	WI 53092-4377	Transaction ID : 2012051519751-55 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	208.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2080.00	
Full Name (Last, First, Middle Initial) B. Steve H. Holter		Date of Receipt
Mailing Address 11390 N Creekside Ct		05 31 2012
City Mequon	StateZip CodeWI53092-4377	Transaction ID : 20120531195241-55 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2080.00	
Full Name (Last, First, Middle Initial) C. Harry P. Hoopis		Date of Receipt
Mailing Address 1133 Elm Tree Rd		05 15 2012
City Lake Forest	State Zip Code IL 60045-1413	Transaction ID : 2012051519751-1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer	Occupation	
Self-Employed	General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	2080.00	
SUBTOTAL of Receipts This Page (optional)		► 624.00
TOTAL This Period (last page this line numb	per only)	

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

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			Detailed Summary Page		11a 13		11b 14	11c 15	$\left  - \right $	12 16	17
	y information copied from such Reports and s for commercial purposes, other than using th				or the		oose of a	soliciting		ntributi	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PA	С							
A.	Full Name (Last, First, Middle Initial) Harry P. Hoopis				Date of	Re	ceipt				
	Mailing Address 1133 Elm Tree Rd				м м 05	/	D D D 31	/ Y		)12	Y
	City Lake Forest	State IL	Zip Code 60045-1413				i <b>on ID : 2</b> Each Re				<u> </u>
	FEC ID number of contributing federal political committee.	С					7	7	_	208.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
в.	Full Name (Last, First, Middle Initial) Brian J. Hubbell				Date of	Re	ceipt				
	Mailing Address 1701 E Westminster Ln				м м 05	/	D D 15	/ Y	ү 20	Y 12	Y
	City Spokane	State WA	Zip Code 99223-6712				on ID : 2 Each Re				)
	FEC ID number of contributing federal political committee.	С					,	7	_	50.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00								
с.	Full Name (Last, First, Middle Initial) Brian J. Hubbell				Date of	Re	ceipt				
	Mailing Address 1701 E Westminster Ln				м м 05	/	D D 31	/ Y		) 12	Y
	City Spokane	State WA	Zip Code 99223-6712				i <mark>on ID : 2</mark> Each Re				10
	FEC ID number of contributing federal political committee.	C					3		_	50.	00
	Name of Employer	Occupation		-							
	Self-Employed	General Ins	surance Agent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		500.00								
s	UBTOTAL of Receipts This Page (optional)		••••••	•			7	- 7	_	308.0	00
т	OTAL This Period (last page this line number	only)	•••••••	•		_	7		_		

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

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			Detailed Summary Page		11a 13		11b 14	11c 15		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of s	oliciting		ntributi	ons
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	С							
A.	Full Name (Last, First, Middle Initial) Scott Iodice			[	Date of	Re	ceipt				
	Mailing Address 1930 Old Court Rd				м м 05		D D 15	/ Y	20	)12	Y
	City Ruxton	State MD	Zip Code 21204-1849				ion ID : 2 Each Re				7
	FEC ID number of contributing federal political committee.	С					9	7		125.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 1250.00								
В.	Full Name (Last, First, Middle Initial) Scott Iodice				Date of	Re	ceipt				
	Mailing Address 1930 Old Court Rd				м м 05	/	D D 31	/ Y	ү 20	ү 12	Y
	City Ruxton	State MD	Zip Code 21204-1849				on ID : 20 Each Re				27
	FEC ID number of contributing federal political committee.	С				_	5	7		125.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00	]							
с.	Full Name (Last, First, Middle Initial) Nicholas E Jahnke				Date of	Re	ceipt				
	Mailing Address 23702 Champe Ford Rd				м м 05	/	D D 15	/ Y		y 12	Y
	City Middleburg	State VA	Zip Code 20117-2940				ion ID : 2 Each Re				)5
	FEC ID number of contributing federal political committee.	С					7	,		25.	00
	Name of Employer	Occupation		_							
	NML Receipt For:			_							
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	]							
s	UBTOTAL of Receipts This Page (optional)						,	- 1		275.(	00
т	OTAL This Period (last page this line number	only)		•			7	7			

FOR LINE NUMBER:

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ITEMIZ	ED RECEIPTS		Use separate schedule(s) for each category of the	(check or	nly on	Ú É			
			Detailed Summary Page	X 11a	$\left  - \right $	11b	11c 15	12	17
Any inform or for com	nation copied from such Reports and St mercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the	e purp ontrib	bose of s	soliciting	contribu	tions
\ \	OF COMMITTEE (In Full)			_					
	Northwestern Mutual Life In	surance	Company Federal PAC	3					
	me (Last, First, Middle Initial) DIas E Jahnke			Date	of Re	ceipt			
Mailing	Address 23702 Champe Ford Rd			М		DD	/ Y	Y Y	Y
City		State	Zip Code	05 		31 on ID : 2	012052	2012 91986-90	5
Middle	burg	VA	20117-2940					is Period	-
	number of contributing political committee.	С				,	9	25	.00
Name of	of Employer	Occupation	 	_					
NML	<b>F</b>	Director - F	ield Production	_					
Receipt	rimary General	Aggregate	Year-to-Date ▼						
	ther (specify) ▼		250.00						
	me (Last, First, Middle Initial)				( F				
	Address 1522 N Prospect Ave			Date		Ceipt	/ V	Y Y	V
				05		31		2012	
City	l.e.e	State WI	Zip Code					91986-57	6
Milwau			53202-6512	Amou	nt of	Each Re	ceipt th	is Period	_
	number of contributing political committee.	С				1	7	22	.00
Name o NML	of Employer	Occupation							
Receipt	For:	Dir Div & Ind		_					
	rimary General	Aggregate	Year-to-Date ▼						
C	ther (specify) ▼	L	220.00						
	me (Last, First, Middle Initial) <b>vn F. Kelley</b>			Date	of Re	ceipt			
Mailing	Address 16 Vintage Walk			05		D D 15	/ Y	y y 2012	Y
City		State OH	Zip Code			-		519751-6	6
Montgo	•	ОП	45249-2101	Amou	nt of	Each Re	ceipt th	is Period	
	number of contributing political committee.	С				7		125	5.00
	of Employer	Occupation							
Self-En Receipt		1	surance Agent	_					
	rimary General	Aggregate	Year-to-Date ▼						
C	ther (specify)		1250.00						
SUBTOT	AL of Receipts This Page (optional)							172	.00
TOTAL T	his Period (last page this line number of	only)				,	,		

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PAC	
Full Name (Last, First, Middle Initial)           Shawn F. Kelley           Mailing Address         16 Vintage Walk			Date of Receipt
City	State	Zip Code	05 31 2012 Transaction ID : 20120531195241-66
Montgomery	OH	45249-2101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		125.00
Name of Employer	Occupation	1	
Self-Employed	General Ins	surance Agent	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) B. John C Kelly			Date of Receipt
Mailing Address 5806 N Kent Ave			05 15 2012
City	State WI	Zip Code	Transaction ID : 2012051119737-593
Whitefish Bay FEC ID number of contributing federal political committee.	С	53217-4612	Amount of Each Receipt this Period 61.00
Name of Employer NML	Occupation VP & Contr		_
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 610.00	
Full Name (Last, First, Middle Initial) C. John C Kelly			Date of Receipt
Mailing Address 5806 N Kent Ave			05 31 2012
City Whitefish Bay	State WI	Zip Code 53217-4612	Transaction ID : 201205291986-593 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		61.00
Name of Employer	Occupation	1	-
NML	VP & Conti	roller	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) V		610.00	
SUBTOTAL of Receipts This Page (optional)		••••••	. 247.00
TOTAL This Period (last page this line number	er only)	••••••	

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

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			Detailed Summary Page	×	11a 13		11b 14	11c	12	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	soliciting	g contribu	utions
<u> </u>	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life II									
A.	Full Name (Last, First, Middle Initial) Troy B. Kemelgor			[	Date of	Re	eceipt			
	Mailing Address 8930 Dunn Ct				м м 05	/	15	) / Y	2012	Y
	City	State	Zip Code			acti		2012051	519751-	63
	Dublin	OH	43017-8880	A	Amount	of	Each F	Receipt th	nis Perioo	k
	FEC ID number of contributing federal political committee.	С					7	7	4	2.00
	Name of Employer	Occupation								
	Self-Employed Receipt For:		urance Agent							
	Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		, 420.00							
B.	Full Name (Last, First, Middle Initial) Troy B. Kemelgor				Date of	Re	eceipt			
	Mailing Address 8930 Dunn Ct				м м 05	/	31	) / Y	ү ү 2012	Y
	City	State	Zip Code						1195241	
	Dublin	OH	43017-8880		Amount	of	Each F	Receipt th	nis Perioo	ł
	FEC ID number of contributing federal political committee.	С				_	7	- 7	42	2.00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00							
С.	Full Name (Last, First, Middle Initial) William S. Koch				Date of	Re	eceipt			
	Mailing Address 4645 Swilcan Bridge Ln S				M M 05	/	15		2012	Y
	City	State	Zip Code						1519751-	
	Jacksonville	FL	32224-5621	/	Amount	of	Each F	Receipt th	nis Perioo	k
	FEC ID number of contributing federal political committee.	С					7		12	5.00
	Name of Employer	Occupation								
	Self-Employed	General Ins	surance Agent							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		1250.00							
s	UBTOTAL of Receipts This Page (optional)		••••••				7		209	9.00
Т	OTAL This Period (last page this line number	only)	••••••				,			

FOR LINE NUMBER:

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ITEMIZED REG	CEIPTS		Use separate schedule(s) for each category of the	(check on	ly one)		12	
			Detailed Summary Page	13 × 11a	14	15	16	17
			y not be sold or used by any pe ddress of any political committee					
				~				
	estern Mutual Life in	surance	Company Federal PA					
Full Name (Last, I William S. Koo	First, Middle Initial) ch			Date o	of Receipt			
Mailing Address 4	1645 Swilcan Bridge Ln S			M		/ Y	YY	Y
City		State	Zip Code	05 Tran	31 saction ID : 3	2012053 <sup>-</sup>	2012 1 <b>195241-</b>	18
Jacksonville		FL	32224-5621		nt of Each Re			
FEC ID number o federal political co	8	С					125.	.00
Name of Employe	er	Occupation						
Self-Employed		General Ins	urance Agent					
Receipt For:	General	Aggregate	Year-to-Date ▼					
Other (speci			1250.00					
	First, Middle Initial)							
B. John L Kords				Date c	of Receipt			
Mailing Address 2	2522 W Daphne Rd			05	15	/ Y	2012	Y
City		State	Zip Code		saction ID : 2	20120511		012
Glendale		WI	53209-3352		nt of Each Re			
FEC ID number o federal political co	8	С				- 7	79.	00
Name of Employe	er	Occupation						
NML		VP Strat Ph	il & Comm Rel					
Receipt For:	General	Aggregate	Year-to-Date ▼					
Other (speci			790.00					
Full Name (Last, I C. John L Kords	First, Middle Initial) smeier			Date c	of Receipt			
Mailing Address 2	2522 W Daphne Rd			05	/ D D 31	/ Y	y y 2012	Y
City		State WI	Zip Code		saction ID :			12
Glendale		VVI	53209-3352	Amour	nt of Each R	eceipt thi	s Period	
FEC ID number o federal political co	0	С		L	7		79	.00
Name of Employe	pr	Occupation						
NML Receipt For:			il & Comm Rel					
Primary	General	Aggregate	Year-to-Date ▼					
Other (speci			790.00					
SUBTOTAL of Rece	eipts This Page (optional)		••••••				283.	00
TOTAL This Period	(last page this line number of	only)	•••••			7		

FOR LINE NUMBER:

(check only one)

PAGE 47 OF

	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	s and Statements may not be sold or used by any sing the name and address of any political commit	
NAME OF COMMITTEE (In Full) The Northwestern Mutual	Life Insurance Company Federal P	AC
Full Name (Last, First, Middle Initial) A. Steven H. Kosnick		Date of Receipt
Mailing Address 5799 Windsona Cir	Ctata Zia Cada	05 / D D / Y Y Y Y 05 15 2012
City Fitchburg	State Zip Code WI 53711-5839	Transaction ID : 2012051519751-12           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) B. Steven H. Kosnick		Date of Receipt
Mailing Address 5799 Windsona Cir		05 31 2012
City Fitchburg	State Zip Code WI 53711-5839	Transaction ID : 20120531195241-12
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) C. Carol L Kracht		Date of Receipt
Mailing Address 449 E Cedar Ln		05 15 _2012 _
City Thiensville	State Zip Code WI 53092-6102	Transaction ID : 2012051119737-943           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	34.00
Name of Employer	Occupation	
NML	VP Dep Gc/Sec & Board Rel	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	340.00	
SUBTOTAL of Receipts This Page (opti	onal)	▶ 118.00
TOTAL This Period (last page this line i	number only)	•

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>&lt;</b> 11a		] 11	b	11c		12	
_					13		14		15		16	17
	y information copied from such Reports and S for commercial purposes, other than using the											
$\backslash$	NAME OF COMMITTEE (In Full)			_								
$\square$	The Northwestern Mutual Life	nsurance	Company Federal PA	2								
Α.	Full Name (Last, First, Middle Initial) Carol L Kracht				Date o	of Re	ecei	ipt				
	Mailing Address 449 E Cedar Ln				05	/	Γ	0 D			012	Y
	City	State	Zip Code		Tran	sact	tion	ID :	201205			3
	Thiensville	WI	53092-6102	_	Amour	nt of	Ea	ch R	eceipt t	his F	Period	
	FEC ID number of contributing federal political committee.	С					7			_	34.	00
	Name of Employer	Occupation	1									
	NML	VP Dep Gc	/Sec & Board Rel									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			11								
	Other (specify)		340.00									
В.	Full Name (Last, First, Middle Initial) M. Kevin Lawhon				Date o	of Re	ecei	ipt				
	Mailing Address 6952 Burnt Sienna Cir				M	/		D D	/	Y	Y	Y
					05			15		20	012	
	City	State	Zip Code		Tran	sact	ion	ID : :	201205 <sup>-</sup>	<u>1519</u>	751-58	3
	Naples	FL	34109-7826		Amour	nt of	Ea	ch R	eceipt t	his F	Period	
	FEC ID number of contributing federal political committee.	С					,		7	_	83.	33
	Name of Employer Self-Employed	Occupation General Ins	urance Agent									
	Receipt For:		Year-to-Date ▼									
	Primary General	riggroguto		11								
	Other (specify)		, 833.30	4								
<u>с</u> .	Full Name (Last, First, Middle Initial) M. Kevin Lawhon				Date o	of Re	ecei	ipt				
	Mailing Address 6952 Burnt Sienna Cir				05	/	Γ	31	/		012	Y
	City	State	Zip Code		Tran	sact	tion	ID :	201205	3119	95241-	58
	Naples	FL	34109-7826		Amour	nt of	Ea	ch R	eceipt t	his F	Period	
	FEC ID number of contributing federal political committee.	С					7			_	83.	33
	Name of Employer	Occupation	1	$\neg$								
	Self-Employed	General Ins	surance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General	33 - 3		11								
	Other (specify)		833.30									
							-	-		-	200.0	66
L <sup>s</sup>	UBTOTAL of Receipts This Page (optional)		••••••	-	<u></u>		7		7	_	200.0	
т	OTAL This Period (last page this line number	only)		•			7		. ,			

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

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			Detailed Summary Page		11a 13	_	11b 14	11c	12		17
	information copied from such Reports and St or commercial purposes, other than using the				or the		pose of	soliciting	contr	ibutio	ons
\	AME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С							
	ull Name (Last, First, Middle Initial) Werner Loots				Date of	Re	eceipt				
_	lailing Address 2664 N Summit Ave				м м 05	1	15	/ Y	y 2012		
	ity Ailwaukee	State WI	Zip Code 53211-3849	A				2012051 eceipt th			0
	EC ID number of contributing ederal political committee.	С					,			33.0	00
N	ame of Employer IML	Occupation Dir Strat Int									
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00	]							
в. <u>\</u>	ull Name (Last, First, Middle Initial) Werner Loots				Date of	Re	eceipt				
_	lailing Address 2664 N Summit Ave	State	Zip Code		м м 05	1	31		2012	2	
	ity ⁄lilwaukee					2012052					
F	EC ID number of contributing ederal political committee.	С	53211-3849		unount		1			33.0	0
	ame of Employer ML	Occupation Dir Strat Int									
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00								
C	ull Name (Last, First, Middle Initial) Robert D. Lowrey				Date of	Re	eceipt				
N	lailing Address 1108 W Goldthread Cir				м м 05	1	15	/ Y	y 2012		ŕ
	ity Sioux Falls	State SD	Zip Code 57108-2824	A				2012051 eceipt th			
	EC ID number of contributing aderal political committee.	С					,	7		42.0	00
N	ame of Employer	Occupation									
	elf-Employed	1	surance Agent								
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00								
SU	BTOTAL of Receipts This Page (optional)								1	08.0	0
	TAL This Period (last page this line number of						,	,			

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

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			Detailed Summary Page		11a 13	╞	11b 14	11c 15	⊢	12 16	17				
	y information copied from such Reports and S for commercial purposes, other than using the							soliciting			ions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	С											
Α.	Full Name (Last, First, Middle Initial) Robert D. Lowrey				Date of	_	· .								
	Mailing Address 1108 W Goldthread Cir				м м 05	1	31	/ Y		) 12	Y				
	City Sioux Falls	State SD	Zip Code 57108-2824					2012053 eceipt th			17				
	FEC ID number of contributing federal political committee.	С					,	7	_	42	.00				
	Name of Employer Self-Employed	Occupation General Ins	urance Agent												
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 420.00												
в.	Full Name (Last, First, Middle Initial) Jeffrey J Lueken			(	Date of	Re	eceipt								
	Mailing Address 1213 E Goodrich Ln				<sup>M</sup> M 05	1	15	/ Y		ү )12	Y				
	City Fox Point	State WI	Zip Code 53217-2946	Transaction ID : 2012051119737-871 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			Amount		,			153.	00				
	Name of Employer NML	Occupation Svp Securit													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1530.00												
с.	Full Name (Last, First, Middle Initial) Jeffrey J Lueken			[	Date of	Re	eceipt								
	Mailing Address 1213 E Goodrich Ln				м м 05	/	31	/ Y		)12	Y				
	City Fox Point	State WI	Zip Code 53217-2946					2012052 eceipt th			1				
	FEC ID number of contributing federal political committee.	С					т. Т.	7	_	153	.00				
	Name of Employer	Occupation													
	NML Receipt For:	Svp Securi		_											
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1530.00												
s	UBTOTAL of Receipts This Page (optional)						,	7		348.	00				
т	OTAL This Period (last page this line number	only)					7		_						

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any p the name and address of any political committee	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance Company Federal PA	C
Full Name (Last, First, Middle Initial) A. Cory A. Mahaffey		Date of Receipt
Mailing Address 13764 Knaus Rd		M - M         /         D - D         /         Y - Y - Y - Y         Y           05         15         2012
City Lake Oswego	State Zip Code OR 97034-2175	Transaction ID : 2012051519751-65
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	]
Full Name (Last, First, Middle Initial) B. Cory A. Mahaffey		Date of Receipt
Mailing Address 13764 Knaus Rd		05 31 2012
City Lake Oswego	StateZip CodeOR97034-2175	Transaction ID : 20120531195241-65 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	]
Full Name (Last, First, Middle Initial) C. Jean M Maier		Date of Receipt
Mailing Address 9642 N Lamplighter Ln		05 15 2012
City Mequon	StateZip CodeWI53092-5321	Transaction ID : 2012051119737-509 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer	Occupation	—
NML	EVP Ent Ops & Tech	
Receipt For:	Aggregate Year-to-Date ▼	_
Other (specify)	2080.00	
SUBTOTAL of Receipts This Page (optional)		292.00
TOTAL This Period (last page this line numb	per only)	

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	DECEIDTE		Use separate schedule(s)				(check only one)								
ITEMIZED I			for each category of the Detailed Summary Page		< 11a		1b	11c		r					
			ny not be sold or used by any po			purpc				ributic					
\		ne name and a	ddress of any political committee	e to so	DIICIT COR	ntribui	tions tr	om sucr	1 com	mittee	e.				
\	DMMITTEE (In Full) hwestern Mutual Life	Insurance	Company Federal PA	С											
Full Name (La A. Jean M Ma	ast, First, Middle Initial) a <b>ier</b>				Date of	Rece	eipt								
Mailing Addre	ss 9642 N Lamplighter Ln				м м 05	/	D D 31	/ Y	201						
City		State	Zip Code			actio		2012052							
Mequon		WI	53092-5321		Amount	of E	ach Re	eceipt th	is Per	iod					
FEC ID numb federal politica	per of contributing al committee.	С				- J		- 7		208.0	00				
Name of Emp	bloyer	Occupation		-											
NML		EVP Ent Op	os & Tech												
Receipt For:	General	Aggregate	Year-to-Date ▼												
Primary Other (s	specify) v		2080.00												
Full Name (La B. Raymond	ast, First, Middle Initial)				Date of	Boo	oint								
	S 7236 N Crossway Rd			_		neu	eihr	/ .	Y	VV					
	7200 N 01033way Nu				05	ŕ	15		2012						
City		State	Zip Code		Transa	actio	n ID : 2	012051	11973	7-543	3				
Fox Point		WI	53217-3519	_	Amount	of E	ach Re	eceipt th	is Per	iod					
FEC ID numb federal politica	per of contributing al committee.	С				. ,		7	_	96.0	0				
Name of Emp	bloyer	Occupation													
NML		Svp Gen Cr	isl & Sec												
Receipt For: Primary	General	Aggregate	Year-to-Date ▼												
	specify) ▼		960.00												
Full Name (La C. Raymond	ast, First, Middle Initial) J J Manista				Date of	Rece	eipt								
Mailing Addre	ss 7236 N Crossway Rd				05	1	D D D	/ Y	y 2012						
City		State	Zip Code		Trans	actio	n ID : 2	2012052	91986	6-543					
Fox Point		WI	53217-3519	_	Amount	of E	ach Re	eceipt th	is Per	iod					
FEC ID numb federal politica	per of contributing al committee.	С				. ,		7		96.0	00				
Name of Emp	bloyer	Occupation													
NML		Svp Gen Cr	nsl & Sec												
Receipt For: Primary	General	Aggregate	Year-to-Date ▼												
	specify) V		960.00												
SUBTOTAL of	Receipts This Page (optional)			•					4	100.0	0				
TOTAL This Pe	eriod (last page this line numbe	er only)	· · · · · · · · · · · · · · · · · · ·	•		,		.,							

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	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance Company Federal PA	C
Full Name (Last, First, Middle Initial) <b>David C. Mc Avoy</b> Mailing Address 11 Mountview Rd		Date of Receipt
City	State Zip Code	05 15 2012
Wellesley	MA 02481-2757	Transaction ID : 2012051519751-6 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	208.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	—
Other (specify) ▼	2080.00	]
Full Name (Last, First, Middle Initial) B. David C. Mc Avoy		Date of Receipt
Mailing Address 11 Mountview Rd		05 31 2012
City Wellesley	StateZip CodeMA02481-2757	Transaction ID : 20120531195241-6 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2080.00	]
Full Name (Last, First, Middle Initial) C. Roger M. Mc Queen		Date of Receipt
Mailing Address 5820 Twin Creek Rd		05 15 2012
City Salt Lake Cty	StateZip CodeUT84108-3605	Transaction ID : 2012051519751-4 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	—
Self-Employed	General Insurance Agent	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1250.00	]
SUBTOTAL of Receipts This Page (optional)		541.00

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			Detailed Summary Page		11a 13	-	11b 14	11c	-	12 16	17				
	y information copied from such Reports and S for commercial purposes, other than using the							soliciting		ntribut	ions				
$\left\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	nsurance	Company Federal PA	С											
A.	Full Name (Last, First, Middle Initial) Roger M. Mc Queen	Roger M. Mc Queen													
	Mailing Address 5820 Twin Creek Rd				м м 05	/	31	) / Y		ү 012	Y				
	City Salt Lake Cty	State UT	Zip Code 84108-3605					2012053 leceipt th			4				
	FEC ID number of contributing federal political committee.	С					<b>7</b>			125	.00				
	Name of Employer Self-Employed	Occupation General Ins	urance Agent												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00												
в.	Full Name (Last, First, Middle Initial) Brian W. McClure				Date of	Re	eceipt								
	Mailing Address 1402 Wyndemere Point Dr			05 / 15 / 2											
	City Champaign	State IL	Zip Code 61822-3349	-				2012051			8				
	FEC ID number of contributing federal political committee.	С							42.	00					
	Name of Employer Self-Employed	Occupation General Ins	urance Agent												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00												
C.	Full Name (Last, First, Middle Initial) Brian W. McClure				Date of	Re	eceipt								
	Mailing Address 1402 Wyndemere Point Dr				м м 05	/	31	) / Y		)12	Y				
	City Champaign	State IL	Zip Code 61822-3349					2012053 Receipt th			68				
	FEC ID number of contributing federal political committee.	С					,				.00				
	Name of Employer	Occupation													
	Self-Employed Receipt For:		surance Agent Year-to-Date ▼												
	Primary General Other (specify)	, iggi cyale	420.00												
s	UBTOTAL of Receipts This Page (optional)						,	- 7		209.	00				
т	OTAL This Period (last page this line number	only)					,								

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	
	y information copied from such Reports and St for commercial purposes, other than using the			13     14     15     16     17       person for the purpose of soliciting contributions       to solicit contributions from such committee.
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In			
Α.	Full Name (Last, First, Middle Initial) Mark J McLennon			Date of Receipt
	Mailing Address 2571 N 86th St	Ctoto	Zin Code	05 15 2012
	City Wauwatosa	State WI	Zip Code 53226-1921	Transaction ID : 2012051119737-578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		34.00
	Name of Employer NML	Occupation	a Advisory Svcs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	]
в.	Full Name (Last, First, Middle Initial) Mark J McLennon			Date of Receipt
	Mailing Address 2571 N 86th St			05 31 2012
	City Wauwatosa	State WI	Zip Code 53226-1921	Transaction ID : 201205291986-578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		34.00
	Name of Employer NML	Occupation VP Invest A	n Advisory Svcs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	
с.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 205 E 4th St			M = M         /         D = D         /         Y = Y = Y = Y         Y
	City Hinsdale	State IL	Zip Code 60521-4603	Transaction ID : 2012051519751-11 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		208.00
	Name of Employer	Occupation	1	
	Self-Employed	General Ins	surance Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00	
	UBTOTAL of Receipts This Page (optional)			276.00
-		,,		

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
or for commercial purposes, other than using	d Statements may not be sold or used by any p the name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance Company Federal PA	C
Full Name (Last, First, Middle Initial)         John W. McTigue         Mailing Address 205 E 4th St		Date of Receipt
City	State Zip Code	05 31 2012 Transaction ID : 20120531195241-11
Hinsdale	IL 60521-4603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer	Occupation General Insurance Agent	
Self-Employed Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify)	2080.00	]
Full Name (Last, First, Middle Initial) B. Joseph F. Meier		Date of Receipt
Mailing Address 208 Long Acres Ln		05 15 2012
City	State Zip Code	Transaction ID : 2012051519751-15
Oviedo	FL 32765-7843	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	]
Full Name (Last, First, Middle Initial) C. Joseph F. Meier		Date of Receipt
Mailing Address 208 Long Acres Ln		05 31 2012
City Oviedo	StateZip CodeFL32765-7843	Transaction ID : 20120531195241-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer	Occupation	-
Self-Employed	General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	420.00	]
SUBTOTAL of Receipts This Page (optional)	)	292.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER:

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IT.	EMIZED RECEIPTS		(check only one)								
11			for each category of the Detailed Summary Page		< 11a 13		11b	11c 15	12	Г	17
Ar or	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma le name and a	ay not be sold or used by any pe ddress of any political committee	erson to so	for the	pur ntrib	pose of	soliciting	g contrib	utior ttee	ns
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	C							
Α.					Date o	f Re	eceipt				
	Mailing Address 2211 E Camelback Rd Unit 905				м м 05	/	D D D 15	/ Y	ү ү 2012	Y	]
	City Phoenix	State AZ	Zip Code 85016-9057	_					519751-		
	FEC ID number of contributing federal political committee.	С					7		4	2.00	)
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00								
в.	Full Name (Last, First, Middle Initial) Ben Miller	l			Date o	f Re	eceipt				
	Mailing Address 2211 E Camelback Rd Unit 905	Otata	Zin Oada		м м 05	/	31	/ Y	у у 2012		]
	City Phoenix	State AZ	Zip Code 85016-9057				-		1195241 nis Perio		
	FEC ID number of contributing federal political committee.	C					1	,		2.00	)
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00								
<u>с</u> .	Full Name (Last, First, Middle Initial) Kevin E. Miller	I			Date o	f Re	eceipt				
	Mailing Address 214 Schenley Rd				м м 05	/	D D D	/ Y	у у 2012	Y	1
	City Pittsburgh	State PA	Zip Code 15217-1171				-		1 <b>519751-</b> nis Perio	-	
	FEC ID number of contributing federal political committee.	С					J		20	8.00	D
	Name of Employer	Occupation									
	Self-Employed	General Ins	urance Agent								
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00								
⊢	CUBTOTAL of Receipts This Page (optional)			• •			7		292	2.00	

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance Company Federal PA	0
Full Name (Last, First, Middle Initial) <b>A.</b> Kevin E. Miller		Date of Receipt
Mailing Address 214 Schenley Rd		05 31 2012
City	State Zip Code	Transaction ID : 20120531195241-46
Pittsburgh	PA 15217-1171	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	208.00
Name of Employer	Occupation	
Self-Employed	General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	2080.00	
Full Name (Last, First, Middle Initial) B. James J. Nemec		Date of Receipt
Mailing Address 22 Maple Ave		05 15 2012
City	State Zip Code	Transaction ID : 2012051519751-69
Larchmont	NY 10538-4041	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2080.00	
Full Name (Last, First, Middle Initial) C. James J. Nemec		Date of Receipt
Mailing Address 22 Maple Ave		05 31 2012
City	State Zip Code NY 10538-4041	Transaction ID : 20120531195241-69
Larchmont	NY 10538-4041	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	208.00
Name of Employer	Occupation	_
Self-Employed	General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	2080.00	1
SUBTOTAL of Receipts This Page (optional)		624.00
TOTAL This Period (last page this line number		

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

(check only one)

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			Detailed Summary Page		11a		11b	11c		12	<b></b>
	y information copied from such Reports and Si for commercial purposes, other than using the						pose of s				
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In										
<u> </u>	Full Name (Last, First, Middle Initial) Jeremy D Newman				Date of	Re	ceipt				
	Mailing Address 1140 Lone Tree Rd	01-1-1	7. 0. 1.		м м 05		31	/ Y	20	)12	Y
	City Elm Grove	State WI	Zip Code 53122-2019				i <b>on ID : 2</b> Each Re				56
	FEC ID number of contributing federal political committee.	С					7	7		21.	00
	Name of Employer NML	Occupation Director									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00								
в.	Full Name (Last, First, Middle Initial) William H Norton				Date of	Re	ceipt				
	Mailing Address 10145 Wavell Rd		Zip Code		м м 05	/	D D 15	/ Y		) 12	Y
	City Fairfax	State VA				on ID : 2 Each Re				)7	
	FEC ID number of contributing federal political committee.	С					,	7		50.	00
	Name of Employer NML	Occupation Regional Di									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00								
с.	Full Name (Last, First, Middle Initial) William H Norton				Date of	Re	ceipt				
	Mailing Address 10145 Wavell Rd				м м 05	/	D D D 31	/ Y		)12	Y
	City Fairfax	State VA	Zip Code 22032-2337				<mark>ion ID : 2</mark> Each Re				7
	FEC ID number of contributing federal political committee.	С					3	7		50.	00
	Name of Employer	Occupation									
	NML Receipt For:	Regional Di		_							
	Primary General Other (specify) <del>V</del>	Aggregale	Year-to-Date ▼ 500.00								
s	UBTOTAL of Receipts This Page (optional)						7	1		121.(	00
т	OTAL This Period (last page this line number of	only)					<b>7</b>				

FOR LINE NUMBER:

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17							(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13	11b	11c	12		17					
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committee	erson for	r the	purpose o	f soliciting	g contrib	utior ittee.	าร					
$\square$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	surance	Company Federal PA	C											
$\square$															
Α.	Full Name (Last, First, Middle Initial) Daniel J O Meara			Da	ate of	Receipt									
	Mailing Address W70N385 Foxpointe Ave				и м 05	/ D	D / Y	2012	Y	1					
	City	State	Zip Code		Frans	action ID			-686						
	Cedarburg	WI	53012-2232	Ar	nount	of Each	Receipt th	nis Perio	d						
	FEC ID number of contributing federal political committee.	С				7	7	2	25.00	)					
	Name of Employer	Occupation													
	NML	VP Agncy D	ev & Prgrms												
	Receipt For:	Aggregate	Year-to-Date ▼												
	Other (specify)		250.00	11											
				1											
В.	Full Name (Last, First, Middle Initial) Daniel J O Meara			Da	ate of	Receipt									
	Mailing Address W70N385 Foxpointe Ave				05	/ D 31	D / Y	y y 2012	Y	1					
	City	State	Zip Code		ransa	action ID	2012052	<u>91986-6</u>	86						
	Cedarburg	WI	53012-2232	Ar	nount	of Each	Receipt th	nis Perio	d						
	FEC ID number of contributing federal political committee.	С			_	7		2	5.00						
	Name of Employer	Occupation													
	NML	VP Agncy D	ev & Prgrms												
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_											
	Other (specify)		, 250.00												
с.	Full Name (Last, First, Middle Initial) Gregory C Oberland			Da	ate of	Receipt									
	Mailing Address 4746 N Cumberland Blvd			Γ	05	/ D 15		y y 2012	Y	1					
	City	State	Zip Code		Frans	action ID	: 201205	1119737	-564						
	Whitefish Bay	WI	53211-1147	Ar	nount	of Each	Receipt th	nis Perio	d						
	FEC ID number of contributing federal political committee.	С				7	-	20	08.00	)					
	Name of Employer	Occupation													
	NML	EVP Ins & T	lech												
	Receipt For: Primary General	Aggregate	Year-to-Date ▼												
	Other (specify)		2080.00												
┢	UBTOTAL of Receipts This Page (optional)					7		25	8.00						

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check on	11b	11c	12	
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma	ay not be sold or used by any pe	erson for the	purpose of	15 soliciting	contribu	tions
or		name and a	doress of any political committee	e to solicit co	ntributions i	rom sucr	n commit	lee.
$\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	C				
Α.	Full Name (Last, First, Middle Initial) Gregory C Oberland			Date o	of Receipt			
	Mailing Address 4746 N Cumberland Blvd			05	/ D D	) / Y	2012	Y
	City	State	Zip Code		saction ID :	2012052		64
	Whitefish Bay	WI	53211-1147	Amoun	t of Each R	leceipt th	nis Period	
	FEC ID number of contributing federal political committee.	С					208	8.00
	Name of Employer	Occupation						
	NML	EVP Ins & T	lech .					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General	· · · ·	2080.00					
	Other (specify)		2000.00					
	Full Name (Last, First, Middle Initial)							
В.	Eric S. Olson			Date o	of Receipt			
	Mailing Address 127 Fairmount Rd			05	15	/ Y	2012	Y
	City	State	Zip Code		saction ID :	2012051	2012 519751-5	2
	Ridgewood	NJ	07450-1422		t of Each R			
	FEC ID number of contributing federal political committee.	С						.00
	Name of Employer	Occupation						
	Self-Employed	General Ins	urance Agent					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		420.00					
с.	Full Name (Last, First, Middle Initial) Eric S. Olson			Date o	of Receipt			
	Mailing Address 127 Fairmount Rd			05	31	) / Y	y y 2012	Y
	City	State	Zip Code	Trans	saction ID :	2012053	81195241	-52
	Ridgewood	NJ	07450-1422	Amoun	t of Each R	leceipt th	nis Period	
	FEC ID number of contributing federal political committee.	С					42	2.00
	Name of Employer	Occupation						
	Self-Employed	General Ins	surance Agent					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Other (specify)		420.00	1				
			1					
	SUBTOTAL of Receipts This Page (optional)				7	7	292	.00
T	<b>OTAL</b> This Period (last page this line number of	only)	••••••					

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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TIEMIZED RECEIPTS	for each category of the Detailed Summary Page	
		any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance Company Federal	PAC
Full Name (Last, First, Middle Initial) A. Kathleen A Oman		Date of Receipt
Mailing Address S63W16495 College A		05 15 2012
City	State Zip Code WI 53150-8303	Transaction ID : 2012051119737-714
Muskego	WI 53150-8303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
NML	VP IT Relationship Mgmt	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	0
Full Name (Last, First, Middle Initial) B. Kathleen A Oman		Date of Receipt
Mailing Address S63W16495 College A	ve	05 31 2012
City	State Zip Code	Transaction ID : 201205291986-714
Muskego	WI 53150-8303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer NML	Occupation VP IT Relationship Mgmt	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	D
Full Name (Last, First, Middle Initial) C. Christen L Partleton		Date of Receipt
Mailing Address 4832 N Shoreland Ave		05 15 2012
City Whitefish Bay	StateZip CodeWI53217-5821	Transaction ID : 2012051119737-830 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	26.00
Name of Employer	Occupation	
NML	VP Facility Ops	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	260.00	o
SUBTOTAL of Receipts This Page (optic	nal)	126.00
TOTAL This Period (last page this line n	umber only)	

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	2	<b>K</b> 11a		1b	11c	12	
	rmation copied from such Reports and St ommercial purposes, other than using the					purpo				
\ \	E OF COMMITTEE (In Full) Northwestern Mutual Life In	isurance	Company Federal I	PAC						
A. Chr	lame (Last, First, Middle Initial) isten L Partleton ng Address 4832 N Shoreland Ave				Date of	Rece	•			
City		State	Zip Code		05 Trans	actio	31 <b>n ID</b> • 1	2012052	2012	_
White	efish Bay	WI	53217-5821					eceipt th		
	ID number of contributing al political committee.	С				,				6.00
NML	e of Employer	Occupation VP Facility								
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	0						
	Name (Last, First, Middle Initial) an G. Petrando				Date of	Rece	eipt			
Mailir	ng Address 9533 Marbella Dr				м м 05	] ′ [	D D 31	/ Y	2012	Y
City Fort	North	State TX	Zip Code 76126-1935					2012053 eceipt th		
	ID number of contributing al political committee.	С							2 <sup>.</sup>	1.00
	e of Employer Employed	Occupation General Ins	urance Agent							
Rece	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00							
	lame (Last, First, Middle Initial) ry A Poliner				Date of	Rece	eipt			
	ng Address 825 N Prospect Ave # U				м м 05	1	D D 15	/ Y	y y 2012	Y
City Milwa	aukee	State WI	Zip Code 53202-3979					2012051 eceipt th		
	ID number of contributing al political committee.	С				. ,		- 7	20	8.00
Name	e of Employer	Occupation								
NML		Pres & Chie	ef Risk Officer							
Rece	pt For: Primary General	Aggregate	Year-to-Date ▼							
	Other (specify) ▼		2080.00	0						
SUBTO	TAL of Receipts This Page (optional)			···· ►					258	5.00
TOTAL	This Period (last page this line number of	only)		···· ►		.,		,		

Use separate schedule(s)

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(check only one)

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			tor each category of the Detailed Summary Page	×	11a 13		11b 14	F	11c 15	12	17
	y information copied from such Reports and St for commercial purposes, other than using the				or the				soliciting	g contrib	utions
$\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC	C							
Α.	Full Name (Last, First, Middle Initial) Gary A Poliner Mailing Address 825 N Prospect Ave # U				Date of	f Re	D	D 31	/ Y	y y 2012	Ŷ
	City	State	Zip Code		Trans	acti	ion ID	):2	012052	91986-5	513
	Milwaukee	WI	53202-3979	A	mount	t of	Each	Re	ceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	С					,		- 1	20	8.00
	Name of Employer NML	Occupation Pres & Chie	of Risk Officer								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		2080.00								
в.	Full Name (Last, First, Middle Initial)				Date of	f Re	ceipt				
	Mailing Address 572 Cottonwood Ln				м м 05	/		D 15	/ Y	2012	Y
	City	State	Zip Code				-			119737-	
	Grafton	WI	53024-9591	A	mount	t of	Each	Re	eceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	С			_		,			2	4.00
	Name of Employer NML	Occupation VP Agency									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00								
с.	Full Name (Last, First, Middle Initial)				Date of	f Re	ceipt				
	Mailing Address 572 Cottonwood Ln				м м 05	/		D 31	/ Y	2012	Y
	City Grafton	State WI	Zip Code 53024-9591	A						2 <b>91986-9</b> nis Perio	
	FEC ID number of contributing federal political committee.	С					7		7	2	24.00
	Name of Employer	Occupation									
	NML	VP Agency	Dev								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		240.00								
s	UBTOTAL of Receipts This Page (optional)						1			25	6.00
т	OTAL This Period (last page this line number of	only)	••••••				,		7		

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

(check only one)

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			Detailed Summary Page		11a 13		11b 14	11c 15		12 16	17
	y information copied from such Reports and for commercial purposes, other than using th				or the		oose of a	soliciting		ntribut	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PA	С							
A.	Full Name (Last, First, Middle Initial) Charles R. Pruett				Date of	Re	ceipt				
	Mailing Address 224 Ensworth PI				м м 05	1	D D D 15	/ Y		) 012	Y
	City Nashville	State TN	Zip Code 37205-1922				i <b>on ID : 2</b> Each Re				6
	FEC ID number of contributing federal political committee.	С					,	- 7	_	125.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00								
в.	Full Name (Last, First, Middle Initial) Charles R. Pruett				Date of	Re	ceipt				
	Mailing Address 224 Ensworth PI				м м 05	/	31	/ Y		)12	Y
	City Nashville	State TN	Zip Code 37205-1922	/			on ID : 2 Each Re				56
	FEC ID number of contributing federal political committee.	С					,	7	_	125.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00								
C.	Full Name (Last, First, Middle Initial) Craig L. Quinlan				Date of	Re	ceipt				
	Mailing Address 2302 Court North Dr				м м 05	/	D D 15	/ Y		)12	Y
	City Melville	State NY	Zip Code 11747-8122				i <b>on ID : 2</b> Each Re				)
	FEC ID number of contributing federal political committee.	С					7		_	42.	00
	Name of Employer	Occupation		-							
	Self-Employed	General Ins	surance Agent								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Primary   General     Other (specify)		420.00								
s	UBTOTAL of Receipts This Page (optional)	· 					7	7	_	292.(	00
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PAGE 66 OF

IТ			Use separate schedule(s)	(ch	eck only	y one)					
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							se of		g cont		
	Mailing Address 2302 Court North Dr         City       State         Melville       NY         FEC ID number of contributing       C         federal political committee.       C         Name of Employer       Occupa         Self-Employed       General         Primary       General         Other (specify) ▼       Aggreg         Full Name (Last, First, Middle Initial)       Steven M Radke         Mailing Address 9600 N Crestwood Ct       C         City       State         Mequon       WI         FEC ID number of contributing       C         federal political committee.       C         Name of Employer       Occupa         NML       VP Gov         Receipt For:       Aggreg         Primary       General         Other (specify) ▼       C         Full Name (Last, First, Middle Initial)       C         Steven M Radke       Mailing Address 9600 N Crestwood Ct         City       State         Mequon       Wi         FEC ID number of contributing       C         City       State         Mequon       Wi         FEC ID number of contributing       C		duress of any pointcar committee	: 10 50		IIIDUII		UIII SUCI		mille	e.
$\rangle$	· · · · · ·	surance	Company Federal PAC	2							
Α.					Date of	Rece	eipt				
	Mailing Address 2302 Court North Dr				м м 05	1	0 0 31	/ Y	201	ү I	Y
	-	State	Zip Code			actior		2012053			0
	Melville	NY	11747-8122	_	Amount	of Ea	ach Re	eceipt th	nis Per	riod	
	5	С								42.0	00
	Name of Employer	Occupation									
		General Ins	urance Agent								
		Aggregate	Year-to-Date ▼								
			420.00								
_					Data	D	·				
<b>D</b> .				_	Date of	Rece	eipi D D		v	Y	<i>r</i>
	Maining Address 9000 N Clestwood Ct				05	1	15	/ 1	_201		r
	City	State	Zip Code		Trans	action	1D : 2	2012051	11973	37-79	8
	Mequon	WI	53092-5355		Amount	of Ea	ach Re	eceipt th	nis Per	riod	
	5	С						7	_	40.0	00
		Occupation									
		VP Govt Re	lations								
		Aggregate	Year-to-Date ▼								
			400.00								
c.					Date of	Rece	eipt				
	Mailing Address 9600 N Crestwood Ct				м м 05	/	0 D	/ Y	201		Y
	City	State	Zip Code		Trans	actior	n ID : :	2012052	29198	6-798	
	Mequon	WI	53092-5355		Amount	of Ea	ach Re	eceipt th	nis Per	riod	
	9	С				7		,		40.0	00
	Name of Employer	Occupation									
		VP Govt Re	lations								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Other (specify)		400.00								
s	UBTOTAL of Receipts This Page (optional)			•						122.0	0
			· · ·	-	<u> </u>	- 7	-	- 1	=	-	Ħ
L '	<b>OTAL</b> This Period (last page this line number of	, iny)	••••••	•			_		- 1		

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ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 17
	nd Statements may not be sold or used by any p g the name and address of any political committee	
NAME OF COMMITTEE (In Full)		
The Northwestern Mutual Lit	e Insurance Company Federal PA	<u> </u>
Full Name (Last, First, Middle Initial) Jeff D. Reeter		Date of Receipt
Mailing Address 7 Williamsburg Ln		M = M         /         D = D         /         Y = Y = Y = Y         Y         O         Y         Y = Y = Y         Y
City	State Zip Code	Transaction ID : 2012051519751-67
Houston	TX 77024-5144	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	—
Self-Employed	General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	1000.00	]
Full Name (Last, First, Middle Initial) B. Jeff D. Reeter		Date of Receipt
Mailing Address 7 Williamsburg Ln		05 31 2012
City	State Zip Code	Transaction ID : 20120531195241-67
Houston	TX 77024-5144	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	]
Full Name (Last, First, Middle Initial) C. David R Remstad		Date of Receipt
Mailing Address 2634 N Lake Dr		M M / D D / Y Y Y Y Y 05 15 2012
City	State Zip Code	Transaction ID : 2012051119737-719
Milwaukee	WI 53211-3837	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70.00
Name of Employer	Occupation	
NML	Svp & Chief Actuary	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General		1
Other (specify)	700.00	
SUBTOTAL of Receipts This Page (optional		270.00
TOTAL This Period (last page this line num	nber only)	

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	Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and St or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance Company Federal PAC	>
Full Name (Last, First, Middle Initial) <b>A.</b> David R Remstad		Date of Receipt
Mailing Address 2634 N Lake Dr		05 / D D / Y Y Y Y Y 01 31 2012
City Milwaukee	State Zip Code WI 53211-3837	Transaction ID : 201205291986-719
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer NML	Occupation Svp & Chief Actuary	_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) B. Adam T. Rhoades		Date of Receipt
Mailing Address 2038 Rosemont Pl		05 15 2012
City Vestavia	StateZip CodeAL35243-1767	Transaction ID : 2012051519751-59 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) C. Adam T. Rhoades		Date of Receipt
Mailing Address 2038 Rosemont PI		05 31 Y Y Y Y Y
City Vestavia	StateZip CodeAL35243-1767	Transaction ID : 20120531195241-59 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer	Occupation	
Self-Employed	General Insurance Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
SUBTOTAL of Receipts This Page (optional)	<b>·</b>	154.00

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

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			Detailed Summary Page		11a 13		11b 14	11c		12 16	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the				or the		pose of	soliciting		ntribut	ions	-
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In											-
A.	Full Name (Last, First, Middle Initial) Daniel A Riedl			[	Date of	Re	eceipt					-
	Mailing Address 6604 Cedar St				м м	/	15	) / Y	Y 20	012	Y	
	City Wauwatosa	State WI	Zip Code 53213-3252	A				<b>201205</b> 1 Receipt th			43	
	FEC ID number of contributing federal political committee.	С					,	· ·		25.	.00	
	Name of Employer NML	Occupation VP Fld Dist	Policies & Admin									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00									
в.	Full Name (Last, First, Middle Initial) Daniel A Riedl				Date of	Re	eceipt					-
	Mailing Address 6604 Cedar St				м м 05	/	31	) / Y	ү 20	)12	Y	
	City Wauwatosa	State WI	Zip Code 53213-3252	A				2012052 Receipt th			3	
	FEC ID number of contributing federal political committee.	С					л. I.	7		25.	00	
	Name of Employer NML	Occupation VP Fld Dist	Policies & Admin									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00									
C.	Full Name (Last, First, Middle Initial) Marcia Rimai				Date of	Re	eceipt					
	Mailing Address 4100 N Lake Dr				м м 05	/	15			ү )12	Y	
	City Shorewood	State WI	Zip Code 53211-1719	A				<b>201205</b> Receipt th			04	
	FEC ID number of contributing federal political committee.	С					,			208	.00	
	Name of Employer	Occupation										
	NML Receipt For:		ef Admin Officer	_								
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00									
s	UBTOTAL of Receipts This Page (optional)			•						258.	00	
т	OTAL This Period (last page this line number o	only)					,	,				

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

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PAGE 70 OF

			Detailed Summary Page		11a		11b		11c		12	
					13		14		15		16	17
	y information copied from such Reports and S for commercial purposes, other than using the											
$\backslash$	NAME OF COMMITTEE (In Full)			_								
$\Big\rangle$	The Northwestern Mutual Life Ir	isurance	Company Federal PA	C								
Α.	Full Name (Last, First, Middle Initial) Marcia Rimai				Date of	Re	ceipt					
	Mailing Address 4100 N Lake Dr				м м 05	/	D 3		/ Y		ү 012	Y
	City	State WI	Zip Code						012052			4
	Shorewood	VVI	53211-1719		Amount	of	Each	Re	ceipt th	is P	Period	
	FEC ID number of contributing federal political committee.	С				_	,			_	208	.00
	Name of Employer	Occupation										
	NML	EVP & Chie	ef Admin Officer									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		2080.00									
В.	Full Name (Last, First, Middle Initial) J. Daniel Rivers				Date of	Re	ceipt					
	Mailing Address 3601 River Ridge Cv				м м 05	/	D 1		/ Y		) 12	Y
	City	State	Zip Code		Trans	acti	on ID	: 2	012051	<u>519</u>	751-2	•
	Prospect	KY	40059-8038	/	Amount	of	Each	Re	ceipt th	is P	Period	
	FEC ID number of contributing federal political committee.	С					,		7	_	208.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00									
с.	Full Name (Last, First, Middle Initial) J. Daniel Rivers				Date of	Re	ceipt					
	Mailing Address 3601 River Ridge Cv				м м 05	/	D 3		/ Y		у 012	Y
	City	State	Zip Code		Trans	acti	ion ID	):2	012053	119	5241-	29
	Prospect	KY	40059-8038	/	Amount	of	Each	Re	ceipt th	is P	Period	
	FEC ID number of contributing federal political committee.	С					,				208	.00
	Name of Employer	Occupation		$\neg$								
	Self-Employed	General Ins	surance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		2000.00									
	Other (specify)		2080.00									
s	UBTOTAL of Receipts This Page (optional)		<b></b>				,		- 1		624.	00
Т	OTAL This Period (last page this line number	only)	••••••	•			, .		,	Ξ		

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PAGE 71 OF

		Detailed Su						11b 14		11c 15		12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Compa	ny Federal PA	С								
Α.	Full Name (Last, First, Middle Initial) Bethany M Rodenhuis Mailing Address 3900 N Lake Dr					Date of	_	D	D	/ Y		Y	Y
	City Shorewood	State WI	Zip Co 53211					ion I		012051 ceipt th	1197		06
	FEC ID number of contributing federal political committee.	С						3		7	_	74.	00
	Name of Employer NML Receipt For:	Occupation VP Corp Plr	•										
	Primary General Other (specify) ▼	Aggregate	Year-to-Da	740.00	]								
В.	Full Name (Last, First, Middle Initial) Bethany M Rodenhuis Mailing Address 3900 N Lake Dr					Date of	f Re		ot 31	/ Y		)12	Y
	City Shorewood	State WI	Zip Co 53211			Trans			ID : 2	012052 ceipt th	9198	86-606	5
	FEC ID number of contributing federal political committee.	С						7		7	_	74.	00
	Name of Employer NML	Occupation VP Corp PIn	g										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Da	te ▼ 740.00	]								
c.	Full Name (Last, First, Middle Initial) Tammy M Roou					Date of	f Re	eceip	ot				
	Mailing Address N99W14710 Amber Dr	Chata	7:- 0			<sup>M</sup> 05	/		р 15	/ Y	20	)12	
	City Germantown	State WI	Zip Co 53022							012051 ceipt th			87
	FEC ID number of contributing federal political committee.	С						,		7	_	30.	00
	Name of Employer	Occupation											
	NML Receipt For:	VP - Era Aggregate	Voar to Da	to ¥									
	Primary General Other (specify) ▼		,	240.00	]								
s	UBTOTAL of Receipts This Page (optional)							,			_	178.(	00
т	OTAL This Period (last page this line number o	nly)						,			_		

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

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		Detailed Summary Page		11a		11b	11c	12	<u> </u>
Any information copied from such Reports and	Statements m	av not be sold or used by any p	erson	13 for the	DU	14	15 soliciting	16 contribut	17 tions
or for commercial purposes, other than using t									
NAME OF COMMITTEE (In Full)			_						
The Northwestern Mutual Life	Insurance	Company Federal PA	C						
Full Name (Last, First, Middle Initial) <b>A.</b> Tammy M Roou				Date o	f Ro	coint			
Mailing Address N99W14710 Amber Dr							/ Y	YY	Y
				05		31		2012	
City Germantown	State WI	Zip Code 53022-6611				-		91986-78	7
FEC ID number of contributing	_			Amoun	t of	Each R	eceipt th	is Period	_
federal political committee.	C					7	7	30	.00
Name of Employer	Occupation	1							
NML	VP - Era								
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		240.00	1						
Full Name (Last, First, Middle Initial) B. Matt Russo				Date o	f Re	ceipt			
Mailing Address 139 Deep Valley Rd				M M		DD	/ Y	YY	Y
City	Ctoto	Zin Codo	_	05		15		2012	
City New Canaan	State CT	Zip Code 06840-2804						519751-6 is Period	1
FEC ID number of contributing	0		'	Amoun					
federal political committee.	C					7		208	.00
Name of Employer	Occupation	1							
Self-Employed	General Ins	urance Agent							
Receipt For:	Aggregate	Year-to-Date ▼	_						
Other (specify) ▼		2080.00							
Full Name (Last, First, Middle Initial) C. Matt Russo				Date o	f Re	ceint			
Mailing Address 139 Deep Valley Rd				M M	_		/ Y	Y Y	Y
				05		31		2012	
City New Canaan	State CT	Zip Code 06840-2804						1195241-	61
FEC ID number of contributing			'	Amoun			eceipt tri	is Period	
federal political committee.	C					7		208	.00
Name of Employer	Occupation	1							
Self-Employed	General Ins	surance Agent							
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify)		2080.00							
		A) (A) (A) (A) (A) (A) (A) (A) (A) (A) (							
								446.	00
SUBTOTAL of Receipts This Page (optional).					÷	7		-++0.	
TOTAL This Period (last page this line number	er only)			L.,		7			

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			Detailed Summary Page		11a 13	-	11b	11c		2	17		
	y information copied from such Reports and s for commercial purposes, other than using the				or the		pose of s	oliciting	cont	ributi	ons		
$\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PA	С									
A.	Full Name (Last, First, Middle Initial) R. Philip Sarnecki				Date of	Re	eceipt						
	Mailing Address 16004 King St				м м 05	/	D D D 15	/ Y	y 201		Y		
	City Overland Park	State KS	Zip Code 66062-7508	A			ion ID : 2 Each Re			-			
	FEC ID number of contributing federal political committee.	С					7	7	_	104.7	17		
	Name of Employer Self-Employed	Occupation General Ins	urance Agent										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1041.70	]									
В.	Full Name (Last, First, Middle Initial) R. Philip Sarnecki				Date of	Re	eceipt						
	Mailing Address 16004 King St				м м 05	1	31	/ Y	201		Y		
	City Overland Park	State KS	Zip Code 66062-7508		Transaction ID : 20120531195241-42           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.								_	104.1	7		
	Name of Employer Self-Employed	Occupation General Ins	urance Agent										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1041.70	]									
с.	Full Name (Last, First, Middle Initial) Joseph M. Savino				Date of	Re	eceipt						
	Mailing Address 8 Benedek Rd				м м 05	/	D D 15	/ Y	y 201		Y		
	City Princeton	State NJ	Zip Code 08540-2227	A			ion ID : 2 Each Re						
	FEC ID number of contributing federal political committee.	С					7	7	_	208.	00		
	Name of Employer	Occupation	I										
	Self-Employed	General Ins	surance Agent										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)		2080.00										
s	UBTOTAL of Receipts This Page (optional)						5	3		416.3	4		
т	OTAL This Period (last page this line number	only)		. [			7	,					

FOR LINE NUMBER:

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	Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		
The Northwestern Mutual Life In	surance Company Federal PA	AC
Full Name (Last, First, Middle Initial) A. Joseph M. Savino		Date of Receipt
Mailing Address 8 Benedek Rd		05 31 2012
City	State Zip Code	Transaction ID : 20120531195241-2
Princeton	NJ 08540-2227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer	Occupation	
Self-Employed Receipt For:	General Insurance Agent	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	2080.00	
Full Name (Last, First, Middle Initial) B. Timothy G Schaefer		Date of Receipt
Mailing Address 1013 E Lexington Blvd		05 15 _2012 _
City	State Zip Code	Transaction ID : 2012051119737-829
Whitefish Bay	WI 53217-5381	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	108.00
Name of Employer NML	Occupation Svp & Chief Info Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	
Full Name (Last, First, Middle Initial) <b>c. Timothy G Schaefer</b>		Date of Receipt
Mailing Address 1013 E Lexington Blvd		05 31 2012
City	State Zip Code	Transaction ID : 201205291986-829
Whitefish Bay	WI 53217-5381	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	108.00
Name of Employer	Occupation	
NML	Svp & Chief Info Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	1080.00	
SUBTOTAL of Receipts This Page (optional)		424.00
TOTAL This Period (last page this line number of	only)	

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

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		Detailed Summary Page		11a 13	$\mid$	11b 14	11c	12	17
Any information copied from such Reports and or for commercial purposes, other than using				or the		bose of	soliciting	contribu	tions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	С						
Full Name (Last, First, Middle Initial) Cal D Schattschneider				ate of	Re	ceipt			
Mailing Address 5940 Stefanie Way				м м	/	D ■ D 31	/ Y	2012	Y
City Caledonia	State WI	Zip Code 53108-9563	A	Trans		on ID : 2		<b>91986-99</b> is Period	
FEC ID number of contributing federal political committee.	C					7		21	.00
Name of Employer NML	Occupation Dir Exp Mg								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00							
Full Name (Last, First, Middle Initial) <b>John E Schlifske</b> Mailing Address 1500 Greenway Ter				Date of	Re /	D D	/ Y	Y Y	Y
City Elm Grove	State WI	Zip Code 53122-1611						2012 <b>119737-7</b> is Period	39
FEC ID number of contributing federal political committee.	C					7		208	.00
Name of Employer NML	Occupation President 8								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00	]						
Full Name (Last, First, Middle Initial) C. John E Schlifske				ate of	Re	ceipt			
Mailing Address 1500 Greenway Ter				м м 05	/	D D 31	/ Y	ү ү 2012	Y
City Elm Grove	State WI	Zip Code 53122-1611						<b>91986-73</b> is Period	
FEC ID number of contributing federal political committee.	С		[			7			8.00
Name of Employer	Occupation								
NML Receipt For:	President &	k CEO Year-to-Date ▼	_						
Primary General Other (specify)	Aygregate	2080.00	]						
SUBTOTAL of Receipts This Page (optional)						7		437	.00
TOTAL This Period (last page this line numb	er only)					,			

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			Detailed Summary Page		11a 13		11b 14	11c	$\vdash$	12 16	17				
	y information copied from such Reports and S for commercial purposes, other than using the							soliciting							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	С											
Α.	Full Name (Last, First, Middle Initial) Kathleen H Schluter			[	Date of	Re	eceipt								
	Mailing Address 5057 N Palisades Rd				05 15 2012 Transaction ID : 2012051119737-741										
	City Whitefish Bay	State WI	Zip Code 53217-5756					2012051 Receipt th			41				
	FEC ID number of contributing federal political committee.	С					7		_	32.	.00				
	Name of Employer NML	Occupation VP & Tax C													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00	1											
В.	Full Name (Last, First, Middle Initial) Kathleen H Schluter			(	Date of	Re	eceipt								
	Mailing Address 5057 N Palisades Rd				м м 05	/	31	) / Y		)12	Y				
	City Whitefish Bay	State WI	Zip Code 53217-5756	-				2012052			1				
	FEC ID number of contributing federal political committee.	С		32.00											
	Name of Employer NML	Occupation VP & Tax C													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00	]											
с.	Full Name (Last, First, Middle Initial) Calvin R Schmidt				Date of	Re	eceipt								
	Mailing Address W205 Allen Rd				м м 05	/	15			)12	Y				
	City Oconomowoc	State WI	Zip Code 53066-9048	-				2012051 Receipt th			67				
	FEC ID number of contributing federal political committee.	С					<b>7</b>		_		.00				
	Name of Employer	Occupation													
	NML Receipt For:	VP Int Cust	•	_											
	Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 780.00												
s	UBTOTAL of Receipts This Page (optional)			•			7		Ξ	142.	00				
т	OTAL This Period (last page this line number	only)		•			7								

#### Image# 12952157010

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
or	or commercial purposes, other than using the			person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PA	C
<b>A.</b>	Full Name (Last, First, Middle Initial) Calvin R Schmidt Mailing Address W205 Allen Rd			Date of Receipt
	City	State	Zip Code	05 31 2012 Transaction ID : 201205291986-767
-	Oconomowoc	WI	53066-9048	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.00
i	Name of Employer	Occupation	1	
	NML	VP Int Cust	t Ops	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		780.00	]
	Full Name (Last, First, Middle Initial) Rodd Schneider			Date of Receipt
	Mailing Address 1415 E Fairy Chasm Rd			05 15 2012
	City	State	Zip Code	Transaction ID : 2012051119737-504
-	Bayside	WI	53217-1433	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		31.00
	Name of Employer NML	Occupation VP Litig & [	n Dist Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 310.00	
	Full Name (Last, First, Middle Initial) Rodd Schneider			Date of Receipt
	Mailing Address 1415 E Fairy Chasm Rd			05 31 2012
-	City Bayside	State WI	Zip Code 53217-1433	Transaction ID : 201205291986-504 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		31.00
Ī	Name of Employer	Occupation	1	
	NML	VP Litig & I	Dist Counsel	
Ì	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		310.00	
รเ	JBTOTAL of Receipts This Page (optional)			▶ 140.00
	TAL This Period (last page this line number			· · · · · · · · · · · · · · · · · · ·

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

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	EMIZED RECEIPTS		Detailed Summary Page		11a		111	b	11c		12							
					13		14		15		16	17						
	y information copied from such Reports and S for commercial purposes, other than using the																	
	NAME OF COMMITTEE (In Full)		_	_														
$\Big)$	The Northwestern Mutual Life Ir	nsurance	Company Federal PA	C														
Α.	Full Name (Last, First, Middle Initial) Todd M Schoon			[	Date of	Re	ecei	pt										
	Mailing Address 923 E Kilbourn Ave # U				м м 05	1		15	/ Y		) 12	Y						
	City	State	Zip Code		Trans	acti	ion	ID : 2	012051	119	737-1	)37						
	Milwaukee	WI	53202-3493	/	Amount	t of	Ead	ch Re	ceipt th	is P	eriod							
	FEC ID number of contributing federal political committee.	С					,		7	_	208.	00						
	Name of Employer	Occupation		-														
	NML	Sr VP Agen	cies															
	Receipt For:	Aggregate	Year-to-Date ▼															
	Primary General			11.														
	Other (specify)		2080.00															
— B.	Full Name (Last, First, Middle Initial) Todd M Schoon				Date of	Re	eceii	pt										
	Mailing Address 923 E Kilbourn Ave				M M	/			/ Y	Y	Y	Y						
	# U				05	Ľ		31			12							
	City	State	Zip Code		Trans	acti	ion	ID : 20	012052	9198	86-103	37						
	Milwaukee	WI	53202-3493	/	Amount	t of	Ead	ch Re	ceipt th	is P	eriod							
	FEC ID number of contributing federal political committee.	ů l						208.00										
	Name of Employer	Occupation		_														
	NML	Sr VP Agen	cies															
	Receipt For:	Aggregate	Year-to-Date ▼															
	Primary General																	
	Other (specify) 🔻		2080.00															
с.	Full Name (Last, First, Middle Initial) Brad P. Seitzinger				Date of	Re	eceij	pt										
	Mailing Address 1672 Chieftan Cir				м м 05	/		15	/ Y		)12	Y						
	City	State	Zip Code		Trans	act	ion	ID : 2	012051	519	751-4	5						
	Oxford	MI	48371-6095	/	Amount	t of	Ead	ch Re	ceipt th	is P	eriod							
	FEC ID number of contributing federal political committee.	С					7		7	_	100	00						
	Name of Employer	Occupation		-														
	Self-Employed	General Ins	urance Agent															
	Receipt For:	Aggregate	Year-to-Date ▼															
	Primary General	33 - 3																
	Other (specify)		1000.00	4														
•	UBTOTAL of Receipts This Page (optional)						-			-	516.	00						
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Т	OTAL This Period (last page this line number	only)	•••••••	•			5	_		-		_						

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

(check only one)

PAGE 79 OF

			Detailed Summary Page		11a 13		11b 14	11c		12 16	17		
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	soliciting	con	ntribut	ions		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir							ioni suci					
A.	Full Name (Last, First, Middle Initial) Brad P. Seitzinger			Date of Receipt									
	Mailing Address 1672 Chieftan Cir				м м 05	/	31	/ Y		) 12	Y		
	City Oxford	State MI	Zip Code 48371-6095					2012053 eceipt th			45		
	FEC ID number of contributing federal political committee.	С					,	- 7	_	100.	00		
	Name of Employer Self-Employed	Occupation General Ins	surance Agent										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	1									
B.	Full Name (Last, First, Middle Initial) David W Simbro				Date of	Re	eceipt						
	Mailing Address 311 E Erie St Unit 4				м м 05	1	D D 15	/ Y	20 <sup>-</sup>	ү 12	Y		
	City Milwaukee	State WI	Zip Code 53202-6040					2012051			027		
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period								
	Name of Employer NML	Occupation Svp Life & A	Ann Products										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00										
с.	Full Name (Last, First, Middle Initial) David W Simbro				Date of	Re	eceipt						
	Mailing Address 311 E Erie St Unit 4				м м 05	1	31	/ Y		) 12	Y		
	City Milwaukee	State WI	Zip Code 53202-6040					2012052 eceipt th			27		
	FEC ID number of contributing federal political committee.	С					7	,		50.	.00		
	Name of Employer	Occupation	1										
	NML Receipt For:		Ann Products	_									
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00										
s	UBTOTAL of Receipts This Page (optional)						, ,	1		200.0	00		
т	OTAL This Period (last page this line number	only)					,	7					

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

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••			Detailed Summary Page		<b>X</b> 11a		11b		11c		12	
Δ۲	ny information copied from such Reports and	Statements m	av not be sold or used by any pr		13 for the	nur	14 1905e		15 olicitino		16 htribut	17 ions
	for commercial purposes, other than using th											
$\setminus$	NAME OF COMMITTEE (In Full)		<b>_</b>									
	The Northwestern Mutual Life I	nsurance	Company Federal PA	;								
Α.	Full Name (Last, First, Middle Initial) Paul W Skalecki				Date of	Re	acein	nt				
А.	Mailing Address W69N463 Fox Pointe A			$\neg$			· ·		/ Y	Y	Y	Y
					05	Ĺ	Ĺ	15			012	
	City	State WI	Zip Code						012051			52
	Cedarburg	VVI	53012	_	Amount	t of	Eac	h Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	7		1	_	32.	00
	Name of Employer	Occupation	I									
	NML	VP Uw Sta	ndards									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify)		320.00									
в.	Full Name (Last, First, Middle Initial) Paul W Skalecki	I			Date of	Re	eceip	ot				
	Mailing Address W69N463 Fox Pointe A				05	/	D	31	/ Y		)12	Y
	City	State	Zip Code		Trans	acti	ion I	ID : 20	012052	9198	86-852	2
	Cedarburg	WI	53012		Amount	t of	Eac	h Red	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С										00
	Name of Employer	Occupation	1	$\neg$								
	NML	VP Uw Star	ndards									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		320.00									
с.	Full Name (Last, First, Middle Initial) Mark W Smith	I			Date of	Re	eceip	ot				
	Mailing Address 614 Park Crest Dr				м м 05	/	D	D 15	/ Y		)12	Y
	City	State WI	Zip Code						012051			53
	Thiensville	VVI	53092-1423	-	Amount	t of	Eac	h Red	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	7		7	_	23	00
	Name of Employer	Occupation	l									
	NML	Ast Gen Cr	nl & Sec									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		230.00									
s	UBTOTAL of Receipts This Page (optional)		•••••	<u> </u>			3	_	7		87.	00
т	OTAL This Period (last page this line number	only)	••••••	•			7					

#### Image# 12952157014

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

FOR LINE NUMBER:

(check only one)

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	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance Company Federal PA	2
A. Full Name (Last, First, Middle Initial) Mark W Smith Mailing Address 614 Park Crest Dr City Thiensville FEC ID number of contributing	State Zip Code WI 53092-1423	Date of Receipt 05 / 31 / 2012 Transaction ID : 201205291986-853 Amount of Each Receipt this Period 23.00
federal political committee.          Name of Employer         NML         Receipt For:         Primary       General         Other (specify) ▼	Occupation Ast Gen Cnl & Sec Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) B. Steve P Sperka Mailing Address S67W17735 Copper Oaks Ct		Date of Receipt
City Muskego FEC ID number of contributing federal political committee.	State Zip Code WI 53150-7503	Transaction ID : 2012051119737-772         Amount of Each Receipt this Period         55.00
Name of Employer NML Receipt For: Primary General Other (specify)	Occupation VP Ltc Aggregate Year-to-Date ▼ 550.00	
C. Full Name (Last, First, Middle Initial) Mailing Address S67W17735 Copper Oaks Ct	State Zip Code	Date of Receipt
Muskego         FEC ID number of contributing federal political committee.         Name of Employer         NML         Receipt For:         □       Primary         □       General         Other (specify) ▼	State     2.p Code       WI     53150-7503       C     Occupation       VP Ltc     Aggregate Year-to-Date ▼       550.00	Transaction ID : 201205291986-772         Amount of Each Receipt this Period         55.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		133.00

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

(check only one)

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			Detailed Summary Page		11a 13	$\vdash$	11b 14	11c	;	12	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	f solicit		ontribu	tions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	С							
Α.	Full Name (Last, First, Middle Initial) Robert L. Spinks Mailing Address 305 Waterbury Cv City Jackson FEC ID number of contributing	State MS	Zip Code 39232-8692			/ acti	eceipt 15 ion ID : Each F	20120	5151	Period	Y .00
	federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	Occupation General Ins	urance Agent Year-to-Date ▼ 420.00	]			7	7			
в.	Full Name (Last, First, Middle Initial) Robert L. Spinks Mailing Address 305 Waterbury Cv City Jackson	State MS	Zip Code 39232-8692			/ acti	eceipt 31 ion ID : Each F	20120	5311		У 5
	FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For:		urance Agent Year-to-Date ▼ 420.00	]			7			42	.00
C.	Full Name (Last, First, Middle Initial) Paul J Steffen Mailing Address 10502 N Stone Creek Dr City	State	Zip Code		Date of	/	eceipt 15 ion ID :		2	2012 9737-5	
	Mequon         FEC ID number of contributing federal political committee.         Name of Employer         NML         Receipt For:         Primary         General         Other (specify) ▼	WI C Occupation VP Agencie	53092-5463				Each F			Period	
s	UBTOTAL of Receipts This Page (optional)			•			,	,		134.	.00
т	OTAL This Period (last page this line number	only)		•			,				

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

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TEMIZED RECEIPTS		Detailed Summary Page		-		11b	,	11c		12	<b>_</b>
Any information copied from such Reports and S or for commercial purposes, other than using the									con		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir											-
Full Name (Last, First, Middle Initial) Paul J Steffen Mailing Address 10502 N Stone Creek Dr				Date of	Re						
City	State	Zip Code	_	05			31		20	12	Ŷ
Mequon	WI	53092-5463	_	Amount		-		012052 ceipt th			)
FEC ID number of contributing federal political committee.	С					7		7		50.	00
Name of Employer NML	Occupation VP Agencie										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00									
Full Name (Last, First, Middle Initial) B. David G Stoeffel				Date of	Re	ceip	ot				
Mailing Address 6311 N Lake Dr				м м 05	/	D	D 15	/ Y	20 <sup>-</sup>	ү 12	Y
City Whitefish Bay	State WI	Zip Code 53217-4343		Trans Amount				012051 ceipt th			4
FEC ID number of contributing federal political committee.	С					7		7		36.	00
Name of Employer NML	Occupation VP Fppd	1									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00									
Full Name (Last, First, Middle Initial) C. David G Stoeffel				Date of	Re	ceip	ot				
Mailing Address 6311 N Lake Dr				м м 05	/	D	31	/ Y	20	ү 12	Y
City Whitefish Bay	State WI	Zip Code 53217-4343		<b>Trans</b> Amount				012052 ceipt th			ł
FEC ID number of contributing federal political committee.	С					7				36.	00
Name of Employer	Occupation	1									
NML         Receipt For:         Primary       General         Other (specify) ▼	VP Fppd Aggregate	Year-to-Date ▼ 360.00									
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			•		-	7	-	7		122.(	00

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

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			Detailed Summary Page		11a 13		11b 14	11c 15		12 16	17	
	y information copied from such Reports and St for commercial purposes, other than using the											
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С								
Α.	Full Name (Last, First, Middle Initial) Richard A Strait				Date of	Re	eceipt					
	Mailing Address 9086 N Tennyson Dr				м м 05	/	D 15	 / Y		) 12	Y	
	City Bayside	State WI	Zip Code 53217-1967		Trans Amount			120511 eipt this			025	
	FEC ID number of contributing federal political committee.	С					3	7		25	.00	
	Name of Employer NML	Occupation Managing D	irector									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	]								
B.	Full Name (Last, First, Middle Initial) Richard A Strait				Date of	Re	eceipt					_
	Mailing Address 9086 N Tennyson Dr				м м 05	/	D 34	 / Y	ү 20 <sup>-</sup>	ү 12	Y	
	City Bayside	State WI	Zip Code 53217-1967		Trans Amount			20529 eipt this			25	
	FEC ID number of contributing federal political committee.	С					7	7		25.	00	
	Name of Employer NML	Occupation Managing D	irector									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	]								
c.	Full Name (Last, First, Middle Initial) Peter F. Striano III				Date of	Re	eceipt					
	Mailing Address 11050 NW 78th Pl				м м 05	/	D 1	 / Y	ү 20	ү 12	Y	
	City Parkland	State FL	Zip Code 33076-4723		Trans Amount			120515 eipt this			7	
	FEC ID number of contributing federal political committee.	С					7			125	.00	
	Name of Employer	Occupation										
	Self-Employed Receipt For:		urance Agent Year-to-Date ▼									
	Primary General Other (specify) ▼		1250.00	]								
s	UBTOTAL of Receipts This Page (optional)			•			7	7		175.	00	
т	OTAL This Period (last page this line number of	only)					,	7				

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

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			Detailed Summary Page		11a 13	-	11b 14	11c	$\vdash$	12 16	17
	y information copied from such Reports and St for commercial purposes, other than using the							soliciting		ntribut	tions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С							
A.	Full Name (Last, First, Middle Initial) Peter F. Striano III				Date of	Re	eceipt				
	Mailing Address 11050 NW 78th PI				м м 05	/	31	) / Y		ү 012	Y
	City Parkland	State FL	Zip Code 33076-4723					2012053 Receipt th			57
	FEC ID number of contributing federal political committee.	С					7		_	125	.00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00	1							
B.	Full Name (Last, First, Middle Initial) Rachel L Taknint				Date of	Re	eceipt				
	Mailing Address 2804 E Newberry Blvd				M M 05	1	15			y 012	Y
	City Milwaukee	State WI	Zip Code 53211-3427					2012051 Receipt th			02
	FEC ID number of contributing federal political committee.	С					7		_	27.	.00
	Name of Employer NML	Occupation VP Info Risl									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00	]							
c.	Full Name (Last, First, Middle Initial) Rachel L Taknint				Date of	Re	eceipt				
	Mailing Address 2804 E Newberry Blvd				м м 05	/	D 1			) 12	Y
	City Milwaukee	State WI	Zip Code 53211-3427					2012052 Receipt th			2
	FEC ID number of contributing federal political committee.	С					7		_		.00
	Name of Employer	Occupation									
	NML Receipt For:	VP Info Ris	K Mgmt Year-to-Date ▼								
	Primary General Other (specify) ▼		270.00	]							
s	UBTOTAL of Receipts This Page (optional)			•			, .			179.	00
т	OTAL This Period (last page this line number of	only)		•			, .				

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

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			Detailed Summary Page		11a 13		11b 14	11c		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	solicitir		ntribut	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life II	nsurance	Company Federal PA	С							
Α.	Full Name (Last, First, Middle Initial) Joe P. Teague Mailing Address 17002 Abastros De Avila				Date of	Re	ceipt		Y = Y	Y	Y
	City	State	Zip Code		05	acti	15	201205		012 9 <b>751-8</b>	
	Tampa FEC ID number of contributing federal political committee.	FL C	33613-5214	/	Amount	of	Each F	Receipt 1	his F	Period 70.	.00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent	_			,				
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 700.00								
B.	Full Name (Last, First, Middle Initial) Joe P. Teague				Date of	Re	ceipt				
	Mailing Address 17002 Abastros De Avila	State	Zip Code		м м 05	1	31	J L		9 012	Y
	Tampa	FL	33613-5214					201205 Receipt 1			3
	FEC ID number of contributing federal political committee.	С					7		_	70.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00								
C.	Full Name (Last, First, Middle Initial) Michael F. Tews				Date of	Re	ceipt				
	Mailing Address 609 S 249th Cir				м м 05	1	15			ү 012	Y
	City Waterloo	State NE	Zip Code 68069-4432					201205 Receipt t			6
	FEC ID number of contributing federal political committee.	С					7			42	.00
	Name of Employer	Occupation									
	Self-Employed Receipt For:		urance Agent	_							
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 420.00								
s	UBTOTAL of Receipts This Page (optional)			•			7			182.	00
т	OTAL This Period (last page this line number	only)		•				,			

### SCHEDULE A (FEC Form 3X) -----

FOR LINE NUMBER:

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т			Use separate schedule(s)	(cheo	k onl	y or	ıe)			
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b	11c 15	12	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		oose of	soliciting	g contrib	utions
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	isurance	Company Federal PA	С						
Α.	Full Name (Last, First, Middle Initial) Michael F. Tews			D	ate of	f Re	ceipt			
	Mailing Address 609 S 249th Cir			Ιſ	м м 05	/	31	/ Y	2012	Y
	City Waterloo	State NE	Zip Code 68069-4432				on ID : 2		<b>3119524</b> 1 nis Perio	
	FEC ID number of contributing federal political committee.	С					,		4	2.00
	Name of Employer	Occupation								
	Self-Employed	General Ins	urance Agent							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		420.00	]						
R	Full Name (Last, First, Middle Initial) Scott P. Theodore				ate of	f Re	ceint			
υ.	Mailing Address 12505 Ventana Mesa Cir			_	аю о м м		15	/ Y	2012	Y
	City	State	Zip Code			acti		2012051	519751-	38
	Castle Pines	CO	A	moun	t of	Each Re	eceipt th	nis Perio	d	
	FEC ID number of contributing federal political committee.	С					7		20	8.00
	Name of Employer Self-Employed	Occupation								
	Receipt For:		urance Agent	_						
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00	]						
с.	Full Name (Last, First, Middle Initial) Scott P. Theodore			D	ate of	f Re	ceipt			
	Mailing Address 12505 Ventana Mesa Cir				м м 05	/	D D 31	/ Y	2012	Y
	City Castle Pines	State CO	Zip Code 80108-9148				ion ID : 2		3119524 <sup>-</sup>	
	FEC ID number of contributing	_			moun	tot	Each Re	eceipt tr	nis Perio	3
	federal political committee.	C				-	9	y	20	8.00
	Name of Employer	Occupation								
	Self-Employed	General Ins	surance Agent	_						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_						
	Other (specify)		2080.00							
s	UBTOTAL of Receipts This Page (optional)						7	- 7	458	3.00
т	OTAL This Period (last page this line number	only)					,	,		

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	Use separate schedule(s)				(check only one)							
			for each category of the Detailed Summary Page		11a 13	$\square$	11b	11c		12	17	
	y information copied from such Reports and St for commercial purposes, other than using the				or the		ose of		g cont	tributio		
$\overline{)}$	NAME OF COMMITTEE (In Full)											
	The Northwestern Mutual Life In	surance	Company Federal PAC	)								
A.	Full Name (Last, First, Middle Initial) Alex J. Tronco			C	Date of	Re	ceipt					
	Mailing Address 11 Stoneridge Dr			1	M M	/	DDD	/ Y	Y			
	City	State	Zip Code	14	05 Trans	acti	15 on ID :	2012051	201 1 <b>5197</b> 1			
	Loudonville	NY	12211-2625	A				eceipt th				
	FEC ID number of contributing federal political committee.	С					,		_	42.0	0	
	Name of Employer	Occupation										
	Self-Employed	General Ins	urance Agent	_								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		420.00									
_	Full Name (Last, First, Middle Initial)											
в.	Mailing Address 11 Stoneridge Dr				Date of	Re		/	V	V		
	Maining Address 11 Stohendge Di				05	ĺ '	31	/ 1	201	2		
	City	State	Zip Code		Trans	actio	on ID : :	2012053	11952	241-64	4	
	Loudonville	NY	12211-2625	A	mount	of	Each R	eceipt th	nis Pe	riod		
	FEC ID number of contributing federal political committee.	С					7	,		42.0	0	
	Name of Employer	Occupation	I									
	Self-Employed Receipt For:		urance Agent	_								
	Primary General	Aggregate	Year-to-Date ▼									
	Other (specify)		420.00									
C.	Full Name (Last, First, Middle Initial) Leo C. Tucker				Date of	Re	ceipt					
	Mailing Address 605 Potomac River Rd				м м	/	D D	/ Y	201			
	City	State	Zip Code			acti		2012051				
	Mc Lean	VA	22102-1402	A	mount	tof	Each R	eceipt th	nis Pe	riod		
	FEC ID number of contributing federal political committee.	С					,		_	75.0	00	
	Name of Employer	Occupation										
	Self-Employed	General Ins	surance Agent	_								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify) V		750.00									
s	UBTOTAL of Receipts This Page (optional)						n			159.0	0	
т	OTAL This Period (last page this line number of	only)		ĺ			,	,				

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

PAGE 89 OF

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check on X 11a	ly one)	11c	12	
Ar	y information copied from such Reports and St	atements ma		erson for the	14 purpose of	15 soliciting	16 contribu	17 tions
	for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	C				
A.	Full Name (Last, First, Middle Initial) Leo C. Tucker			Date o	f Receipt			
	Mailing Address 605 Potomac River Rd			05	/ D D	/ Y	ү ү 2012	Y
	City Mc Lean	State VA	Zip Code 22102-1402		saction ID: t of Each Re			54
	FEC ID number of contributing federal political committee.	С						.00
	Name of Employer	Occupation		_				
	Self-Employed	General Ins	urance Agent					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼		750.00					
в.	Full Name (Last, First, Middle Initial) Robert J. Waltos Jr.			Date o	f Receipt			
	Mailing Address 7 Castaways N			м м 05	/ D D 15	/ Y	ү ү 2012	Y
	City	State	Zip Code	Trans	saction ID : 2	2012051	519751-2	0
	Newport Beach	CA	92660-8403	Amoun	t of Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					100	.00
	Name of Employer	Occupation						
	Self-Employed	General Ins	urance Agent					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		1000.00					
С.	Full Name (Last, First, Middle Initial) Robert J. Waltos Jr.			Date o	f Receipt			
	Mailing Address 7 Castaways N			05	/ D D 31	/ Y	y y 2012	Y
	City	State	Zip Code	Tran	saction ID :	2012053	1195241	·20
	Newport Beach	CA	92660-8403	Amoun	t of Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С				7	100	.00
	Name of Employer	Occupation						
	Self-Employed	General Ins	urance Agent					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Other (specify) ▼		1000.00					
s	UBTOTAL of Receipts This Page (optional)						275.	00
т	OTAL This Period (last page this line number of	only)				,		

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

(check only one)

PAGE 90 OF

			Detailed Summary Page		11a 13		11b 14		11c 15		12 16	17
	y information copied from such Reports and St for commercial purposes, other than using the				or the		pose (		oliciting		ntribut	ons
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С								
<b>A</b> .	Full Name (Last, First, Middle Initial) P. Andrew Ware Mailing Address 7900 N Berwyn Ave City Glendale FEC ID number of contributing federal political committee.	State WI	Zip Code 53209-1810			/ acti	ion ID	5 : <b>2</b>	/ Y 012051 ceipt th	20 <b>119</b>		
	Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation VP Actuary Aggregate		]								
в.	Full Name (Last, First, Middle Initial) P. Andrew Ware Mailing Address 7900 N Berwyn Ave City Glendale	State	Zip Code 53209-1810			/ acti	ion ID	1 : <b>2</b>	/ Y 012052		86-489	Y
	FEC ID number of contributing federal political committee. Name of Employer NML Receipt For:	Occupation VP Actuary						ne	ceipt th		40.	00
C.	Full Name (Last, First, Middle Initial) Alison F Watson Mailing Address 420 Independence Ave SE	State	Zip Code		Date of	/	1	5	/ Y 012051	20	12	
	Washington         FEC ID number of contributing federal political committee.         Name of Employer         NML         Receipt For:         Primary       General         Other (specify) ▼	DC C Occupation Dir Fed Rel	20003-1046						ceipt th			
s	UBTOTAL of Receipts This Page (optional)						7				130.(	00
т	OTAL This Period (last page this line number of	only)					<u>y</u>					

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

(check only one)

PAGE 91 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance Company Federal PA	C
Full Name (Last, First, Middle Initial) Alison F Watson Mailing Address 420 Independence Ave SE		Date of Receipt
City	State Zip Code DC 20003-1046	Transaction ID : 201205291986-1009
Washington FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer NML Receipt For: Primary General Other (specify) ▼	Occupation Dir Fed Relations Aggregate Year-to-Date ▼ 500.00	]
Full Name (Last, First, Middle Initial)         Jeffrey B Williams         Mailing Address 2004 N 72nd St		Date of Receipt
City Wauwatosa	StateZip CodeWI53213-1828	05         15         2012           Transaction ID : 2012051119737-553           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer NML	Occupation VP Corp Risk Mgmt	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	]
Full Name (Last, First, Middle Initial) C. Jeffrey B Williams	·	Date of Receipt
Mailing Address 2004 N 72nd St		05 31 2012
City Wauwatosa	State Zip Code WI 53213-1828	Transaction ID : 201205291986-553 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer	Occupation	-
NML	VP Corp Risk Mgmt	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 280.00	]
SUBTOTAL of Receipts This Page (optional)	······	106.00
TOTAL This Period (last page this line numbe		

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

(check only one)

PAGE 92 OF

			Detailed Summary Page		11a 13		11b 14	11c		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	solicitin		ontribut	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	isurance	Company Federal PA	С							
Α.					Date of	Re	eceipt				
	Mailing Address 11128 N Whilton Rd				м м 05	/	31	/		2012	Y
	City Mequon	State WI	Zip Code 53097-3439				i <mark>on ID :</mark> Each R				49
	FEC ID number of contributing federal political committee.	С					7			22	00
	Name of Employer NML	Occupation Fppd Reg S									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00								
в.	Full Name (Last, First, Middle Initial) John William Wright II Mailing Address 4463 Jett Rd NW				Date of	Re					
					<sup>M</sup> M	/	D D		2	012	Y
	City Atlanta	State GA	Zip Code 30327-3563	-			i <b>on ID :</b> Each R				1
	FEC ID number of contributing federal political committee.	С					,		_	100.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00								
с.	Full Name (Last, First, Middle Initial) John William Wright II			1	Date of	Re	eceipt				
	Mailing Address 4463 Jett Rd NW				м м 05	1	31	/		012	Y
	City Atlanta	State GA	Zip Code 30327-3563				ion ID : Each R				44
	FEC ID number of contributing federal political committee.	С					7	7		100	.00
	Name of Employer	Occupation									
	Self-Employed Receipt For:	General Ins	surance Agent	_							
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00								
s	UBTOTAL of Receipts This Page (optional)			•			y	· · ·	+	222.	00
Т	OTAL This Period (last page this line number of	only)	•••••••	•			7				

FOR LINE NUMBER:

(check only one)

PAGE 93 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
or for commercial purposes, other than using		person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance Company Federal P	AC
Full Name (Last, First, Middle Initial)         Conrad C York         Mailing Address 1313 N Franklin Pl         City         Milwaukee         FEC ID number of contributing federal political committee.         Name of Employer         NML         Receipt For:         Primary       General         Other (specify) ▼	State       Zip Code         WI       53202-2980         C       Occupation         Occupation       VP Marketing         Aggregate Year-to-Date ▼       760.00	Date of Receipt
Full Name (Last, First, Middle Initial) B. Conrad C York Mailing Address 1313 N Franklin PI City Milwaukee FEC ID number of contributing federal political committee. Name of Employer NML	State Zip Code WI 53202-2980	Date of Receipt 05 / 31 / 2012 Transaction ID : 201205291986-745 Amount of Each Receipt this Period 76.00
Receipt For: Primary General Other (specify) ▼	VP Marketing Aggregate Year-to-Date ▼ 760.00	
Full Name (Last, First, Middle Initial) T. Scott Zach Mailing Address 6630 Country Creek Ln		Date of Receipt
City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: □ Primary □ General Other (specify) ▼	State     Zip Code       IA     52403-7023       C       Occupation       General Insurance Agent       Aggregate Year-to-Date ▼       420.00	Transaction ID : 2012051519751-60         Amount of Each Receipt this Period         42.00
SUBTOTAL of Receipts This Page (optional)		194.00
TOTAL This Period (last page this line numb	per only)	

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

(check only one)

PAGE 94 OF

			Detailed Summary Page		11a	11b	11c	-	12 16	17
	y information copied from such Reports and for commercial purposes, other than using t				or the	purpose	of soliciti		ontribut	tions
	NAME OF COMMITTEE (In Full)						13 HUIII 50			
	The Northwestern Mutual Life	Insurance	Company Federal PA	C						
Α.	Full Name (Last, First, Middle Initial) T. Scott Zach			[	Date of	f Receip	t			
	Mailing Address 6630 Country Creek Ln				м м 05		D / 31		y y 2012	Y
	City	State	Zip Code				D : 20120			60
	Cedar Rapids	IA	52403-7023		Amount	t of Eacl	h Receipt	this	Period	
	FEC ID number of contributing federal political committee.	С				7		_	42	.00
	Name of Employer	Occupation	1							
	Self-Employed	General Ins	surance Agent							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		420.00							
в.	Full Name (Last, First, Middle Initial) Thomas D Zale				Date of	f Receip	t			
	Mailing Address 2818 E Menlo Blvd				м м 05		15 /		2012	Y
	City	State	Zip Code		Trans	action I	D : 201205	<u>5111</u> 9	9737-7	73
	Shorewood	WI	53211-2652	/	Amount	t of Eacl	h Receipt	this	Period	
	FEC ID number of contributing federal political committee.	С					,		50	.00
	Name of Employer	Occupatior	1							
	NML	Managing [	Director							
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 500.00							
— C.	Full Name (Last, First, Middle Initial) Thomas D Zale				Date of	f Receip	t			
	Mailing Address 2818 E Menlo Blvd				м м 05	/ D	31 /		2012	Y
	City Shorewood	State WI	Zip Code 53211-2652				<b>D : 20120</b> h Receipt			
	FEC ID number of contributing federal political committee.	С				7	1			0.00
	Name of Employer	Occupation	1							
	NML	Managing	Director							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify)		500.00	1						
			7 7							
s	UBTOTAL of Receipts This Page (optional).					- 7		-	142.	.00
Т	OTAL This Period (last page this line number	er only)				7				

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

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PAGE 95 OF

			Detailed Summary Page		11a		11b	11c		12	
Δr	y information copied from such Reports and S	Statemente m	av not be sold or used by any m		13 for the		14 nose o	15 f soliciting		16 ntribut	17 tions
	for commercial purposes, other than using the										
$\setminus$	NAME OF COMMITTEE (In Full)										
	The Northwestern Mutual Life In	nsurance	Company Federal PA	C							
Α.	Full Name (Last, First, Middle Initial) Rick T Zehner				Date of	F D c	noint				
А.	Mailing Address 203 W Ravine Baye Rd			- '			D	D / Y	Y	Y	Y
					05	ľ	15			012	
	City	State WI	Zip Code				-	: 2012051			44
	Bayside	VVI	53217-1334	_ /	Amount	t of	Each I	Receipt th	is F	Period	
	FEC ID number of contributing federal political committee.	С					7		_	35	.00
	Name of Employer	Occupation	1								
	NML	VP Special	Projects								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		350.00								
в.	Full Name (Last, First, Middle Initial) Rick T Zehner				Date of	f Re	eceipt				
	Mailing Address 203 W Ravine Baye Rd				м м 05	/	31			) 12	Y
	City	State		Trans	acti	ion ID :	: 2012052			4	
	Bayside	WI	53217-1334	_ /	Amount	t of	Each I	Receipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С					,	3	_	35.	.00
	Name of Employer	Occupation	l								
	NML	VP Special	Projects								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_							
	Other (specify)		350.00								
с.	Full Name (Last, First, Middle Initial) Todd O Zinkgraf				Date of	f Re	eceipt				
	Mailing Address 118 Ferris Dr				м м 05	/	D 15			у 012	Y
	City North Prairie	State WI	Zip Code 53153-9455					: 2012051 Receipt th			69
	FEC ID number of contributing federal political committee.	С					,				.00
	Name of Employer	Occupation	1	_							
	NML	VP Ent Sol	utions								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		500.00								
	Other (specify)		500.00								
s	UBTOTAL of Receipts This Page (optional)			•			7	7		120.	00
т	OTAL This Period (last page this line number	only)					7				

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

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			Detailed Summary Page		11a 13		11b 14		11c 15		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		oose o		oliciting		ntributi	ions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	0								
<b>A</b> .	Full Name (Last, First, Middle Initial) Todd O Zinkgraf			[	Date of	Re	· ·					
	Mailing Address 118 Ferris Dr				м м 05	1	31	- 1	/ Y		012	Y
	City	State	Zip Code			acti			012052			•
	North Prairie	WI	53153-9455	/	Amount	of	Each I	Rec	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	7		7	_	50.	00
	Name of Employer	Occupation										
	NML Receipt For:	VP Ent Solu		_								
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00									
В.	Full Name (Last, First, Middle Initial) Jeffrey Zuzolo				Date of	Re	ceipt					
	Mailing Address 104 Wildwood Dr				м м 05	/	D 15	- 1	/ Y		)12	Y
	City Avon	State CT	Zip Code 06001-4413						012051			)
	FEC ID number of contributing federal political committee.	C			Amouni	OT	Each I	Rec	ceipt th	IS P	208.	00
	Name of Employer Self-Employed	Occupation General Ins	urance Agent									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00									
с.	Full Name (Last, First, Middle Initial)			[	Date of	Re	ceipt					
	Mailing Address 104 Wildwood Dr				м м 05	/	D 31		/ Y		)12	Y
	City Avon	State CT	Zip Code 06001-4413						012053			19
	FEC ID number of contributing federal political committee.	C			Amount	: of	Each I	Rec	ceipt th	is P	'eriod 208.	00
	Name of Employer	Occupation		_								
	Self-Employed		urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		2080.00									
s	UBTOTAL of Receipts This Page (optional)			•			7		-		466.0	00
Т	OTAL This Period (last page this line number	only)		•			,		,	2	4966.0	00

SCHEDULE B (FEC Form 3X)		FOR I		NUMBER	:			PAGE	97 (	DF 103				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check				23	2	4	25	26				
	Detailed Summary Page		210	22 28a	-	23 28b		BC	29	30b				
Any information copied from such Reports and State or for commercial purposes, other than using the nat														
NAME OF COMMITTEE (In Full)	·													
The Northwestern Mutual Life Insu	Irance Company Fed	eral P/	AC											
Full Name (Last, First, Middle Initial) A. US Bank				Date o	of Di	sburse	ement							
Mailing Address 777 E.Wisconsin Ave.				05	/	D 1	D / 4		2012	Y				
City Milwaukee	State Zip Code WI 53202			Transaction ID : CC71D5D2CE376046E1C										
Purpose of Disbursement Service Charge		001		Amount of Each Disbursement this Period										
Candidate Name		Categor Type	y/			,		,	244					
Office Sought: House Disburse Senate President District:	ment For: Primary General Other (specify) ▼													
Full Name (Last, First, Middle Initial)				Date o	of Di	sburse	ement							
				M N	/	D	D /	Y	ΥY	Y				
Mailing Address				<u> </u>				L.,						
City	State Zip Code													
Purpose of Disbursement				Amount of Each Disbursement this Period										
Candidate Name		Categor Type	y/											
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼													
State: District:														
Full Name (Last, First, Middle Initial)				Date o		sburse		V	YY	V				
Mailing Address						Ľ.		Ľ.						
City	State Zip Code													
Purpose of Disbursement														
Candidate Name		Categor Type	y/	Amount of Each Disbursement this Period										
Office Sought: House Disburse Senate President District:	ment For: Primary General Other (specify) ▼							7						
				_	_				_	_				
SUBTOTAL of Disbursements This Page (optional).				Ļ	-	7		,	244					
TOTAL This Period (last page this line number only	)					7		,	244	.09				

	CHEDULE B (FEC Form 3X)	oroto ophadula/-1				UMBE	R:			PA	٩GE	98 (	OF 103						
IT	EMIZED DISBURSEMENTS		parate schedule(s) a category of the	(C	hec	k only				·	7.65								
		Detailed Summary P				21b 27	22 28	a   X	23 28b		24 28c		25 29	26 30b					
	y information copied from such Reports and Stater for commercial purposes, other than using the nar																		
$\left \right\rangle$	NAME OF COMMITTEE (In Full)																		
	The Northwestern Mutual Life Insu	irance C	Company Fe	dera	I P	AC													
	Full Name (Last, First, Middle Initial)																		
Α.	Ben Cardin for Senate						Date	of D	isburs	ser	nent								
	Mailing Address PO Box 21093						05 / D D / Y Y Y Y 05 10 2012												
	City	Transaction ID · 24786F12D36D2708																	
	Catonsville	MD	21228				Transaction ID : 24786E12D36D27088C2												
	Purpose of Disbursement 2012 General			(	011		Amount of Each Disbursement this Period												
	Candidate Name			Cat	eao	rv/													
	Benjamin L. Cardin				ype														
	Office Sought:     House     Disburser       X     Senate     President	ment For: Primary Other (spe	K General																
	State: MD District:																		
_	Full Name (Last, First, Middle Initial)																		
В.	Bob Corker for Senate 2012						Date	of D	isburs	ser	nent								
	Mailing Address 1910 21st Avenue South						05 14 2012												
	City	State	Zip Code				Transaction ID : 64307A80BB33D												
	Nashville	TN	37212				Tra	nsac	tion I	D	64307	480E	3B33D	7CD9B8					
	Purpose of Disbursement 2012 General						<u></u>												
				(	011		Amount of Each Disbursement this Peric												
	Candidate Name			Cat			2500.00												
	Bob Corker Office Sought: House Disburser	ment For:	2012	I	ype	•													
	Senate	Primary	General																
	President	Other (spe	ecify)																
	State: TN District:	(-1-	· · · · · · · · · · · · · · · · · · ·																
_	Full Name (Last, First, Middle Initial)																		
C.	Dave Camp for Congress							-	isburs					_					
	Mailing Address 5915 Eastman Avenue Suite 100						M 05			21			012	Y					
	City	State	Zip Code				Tra	ne 20	tion I	<u>п</u> .	7D837		0780	7050 4					
	Midland	48640				IId	11580		. 0	10031	01 00	51 691	_1 330A						
	Purpose of Disbursement Voided 7/18/11 Disbursement			011		Amo	unt of	Each	~ [	Disburse	mon	t thio	Doriod						
	Candidate Name					n/	Amo		Laci		Jisbui se	men	1 1115	renou					
	Dave Camp			Cat T	iype		-1000.00												
	Senate President	ment For: Primary Other (spe	General					_											
	State: MI District: 04																		
s	UBTOTAL of Disbursements This Page (optional)					•	E	_	7		- 7	_	5000	0.00					
т	OTAL This Period (last page this line number only)	)				•			7										

S	CHEDULE B (FEC Form 3X)						NU					P۵	GF	99	OF 103			
	EMIZED DISBURSEMENTS	Use separate schedule(s)					E NUMBER: PAGE 99 OF 103 Ily one)											
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	y information copied from such Reports and Stater for commercial purposes, other than using the nar																	
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)	_	_		_													
	The Northwestern Mutual Life Insu	rance C	Company Fe	dera														
۸	Full Name (Last, First, Middle Initial)							Date of	Die	burec	mon	+						
	Dave Camp for Congress								018		_				- V			
	Mailing Address 5915 Eastman Avenue Suite 100						05 24 2012											
	City	State	Zip Code				Transaction ID : 30259A76120D44C414B											
	Midland	MI	48640					110115	acu		. 50	2334	1012	2004	104140			
	Purpose of Disbursement 2012 Primary			C	)11			Amount	of	Each	Disb	urse	ment	t this	Period			
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	Dave Camp Office Sought: V House Disburser	ment For:		T	ype		1000.00											
	Office Sought: X House Disburser Senate X President																	
	State: MI District: 04																	
	Full Name (Last, First, Middle Initial)																	
В.	Democratic Senatorial Campaign (	Commit	tee					Date of	Dis	sburse			Y	Y	Y			
	Mailing Address 120 Maryland Ave NE							05 25 2012										
	City	State	Zip Code					Trans	acti	on ID	: 6B	80C	0419	3D0A	D2D50C			
	Washington Purpose of Disbursement	DC	20002															
	2012 Contribution			(	)11		Amount of Each Disbursement this Period											
	Candidate Name	<b>-</b>		Cate			15000.00											
	Democratic Senatorial Campaign (			T	уре				-	7		7		1000	0.00			
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<u>с</u> .	Full Name (Last, First, Middle Initial)							Date of	Dis	burse	emen	t						
•	Thends of Dan Marier							M M	/	D	_	_	Y	Y	Y			
	Mailing Address PO Box 230							05		1		L		012				
	City	State	Zip Code					Trana	+ i	on ID	. 47			1024	2479BE			
	Syracuse	NY	13201					TTans	acu		. 4/	DAJ	5520	1034	2479DE			
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	Daniel Benjamin Maffei			Cate	ego ype									100	0.00			
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	President	Other (spe																
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	y information copied from such Reports and Stater for commercial purposes, other than using the nam																
$\square$	NAME OF COMMITTEE (In Full)																
	The Northwestern Mutual Life Insu	rance (	Company Feo	deral	P	AC											
~	Full Name (Last, First, Middle Initial)						Date o	f Die	burco	mont							
А.	Friends of Jim Clyburn								Duise		Y	YY	Y				
	Mailing Address PO Box 12567						05		1.	4	2	2012					
	City S Columbia	State SC	Zip Code 29211				Trans	acti	on ID	: DA10	C5B91	7E60F	6FF822				
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		ment For:	2012	13	/pe				7								
	Senate	Primary	General														
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	Full Name (Last, First, Middle Initial)																
В.	Jim Himes for Congress						Date o	f Dis	burse	ment							
							м – м 05	/	D			y y	Y				
	Mailing Address 857 Post Road, #312									7	4	2012					
	City Fairfield	State CT	Zip Code 06824				Trans	sacti	on ID	: 35A8	D4B4	74E93	F1BF3A				
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	James A. Himes				/pe	<i>J.</i>	4000.00										
	Office Sought: X House Disburser	nent For: Primary	2012 X General														
	President	Other (sp															
	State: CT District: 04																
C.	Full Name (Last, First, Middle Initial)						Date o	f Die	hurso	mont							
0.	Montanans for Tester						M M	/	D		Y	Y Y	Y				
	Mailing Address PO Box 3171						05		1			2012					
	5	State	Zip Code				Trans	sacti	on ID	: 483D	575FI	D4F3FI	FA5408				
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	Jon Tester           Office Sought:         House         Disburser	ment For:	2012	Ту	/pe			_	7	_		1000					
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TEMIZED DISBURSEMENTS       Use separate schedule(s) the rach category of the Detailed Summary Page       Image and the page of schedule(s) image and the page of schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedule(schedu	S	CHEDULE B (FEC Form 3X)		FORI	LINE NUMBER: PAGE 101 OF 103								
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ar 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         Full Name (Last, First, Middle Initial)       Date of Disbursement         A. Mulyaney for Congress       Date of Disbursement         Mailing Address PO Box 1975       01         City       State       21         Voided 122/11 Disbursement       011         Candidate Name       Disbursement       011         Other Sought       Feinary       General         Other (specify)        101         State:       Sc       29721         Purpose of Disbursement       Disbursement for: 2012       Anount of Each Disbursement file         Other (specify)        101       Category/ Type         Other (specify)        Date of Disbursement         B. Mulvaney for Congress       Disbursement for: 2012       2012         City       State       SC       29721         Purpose of Disbursement       Disbursement for: 2012       Code         Candidate Name       Disbursement for: 2012       Code         City       State       SC       29721         Purpose of Disbursement       Disb													
The Northwestern Mutual Life Insurance Company Federal PAC         Full Name (Last, First, Middle Initial)         A. Mulvaney for Congress         Mailing Address PO Box 1975         City         Lancaster         State       Zip Code         Lancaster       State         Voided 122/1 Disbursement       011         Candidate Name       Disbursement         John Michael Mulvaney       Disbursement         Office Sought       House         State:       Sc 2ip Code         State:       Sc 2ip Code         City       State:         City       State:         Purpose of Disbursement       Other (specify) ▼         Mailing Address PO Box 1975       Date of Disbursement         City       State:       Zip Code         Lancaster       Sc 2ip Code         City       State:       Zip Code         City       State:       Office Sought:       House         Office Sought:       President       Disbursement For: 2012       Office         City       State:       Disbursement       Cot         Sc Disbursement       Cot       2002       President         Office Sought:       President													
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A. Mulvaney for Congress       Date of Disbursement         Mailing Address PO Box 1975       Transaction ID : 2454FA1B54Be179C7D6         City       State       29721         Purpose of Disbursement       011         Voided 12/2/11 Disbursement       011         Candidate Name       011         John Michael Mulvaney       011         Office Sought:       House         President       Disbursement For: 2012         Office Sought:       House         President       Other (specify)         State:       SC         State:       SC         State:       SC         Purpose of Disbursement       011         Office Sought:       Hame (Last, Frist, Middle Initial)         B. Mulvaney for Congress       Date of Disbursement         Mailing Address       PO Box 1975         City       State       Zip Code         Lancaster       SC       29721         Purpose of Disbursement       011         City Primary       General       011         Candidate Name       Disbursement For: 2012       Anount of Each Disbursement         State:       SC       State       Zip Code         National Republican Senatorial Com			rance Company	Federal PA	AC								
Mailing Address PO Box 1975	Α.				Date of Disbursement								
City       State       Zip Code         Lancaster       SC       29721         Purpose of Disbursement       011         Cardidate Name       Category/         John Michael Mulvaney       Primary         Office Sought:       Possion         Propose of Disbursement       011         Category/       Type         Office Sought:       Possion         Primary       General         Other (specify)       Transaction ID : 2454FA1B54B6179C7D6         Amount of Each Disbursement this Period         City       Senate         Primary       General         Other (specify)       Transaction ID : 2454FA1B54B6179C7D6         Full Name (Last, First, Middle Initia)       Date of Disbursement         B.       Mulvaney for Congress         Mailing Address: PO Box 1975       Office Sought:         City       State       Zip Code         Purpose of Disbursement       For 2012         City       State       Zip Code         Purpose of Disbursement       President         Other (specify)       Transaction ID : C727612004080112326         Purpose of Disbursement       Distorsement         State:       Senate       Disbursement													
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City       State       Zip Code         Lancaster       SC       29721         Purpose of Disbursement       011         Candidate Name       011         John Michael Mulvaney       011         Office Sought:       House         Senate       President         President       Other (specify)         State:       SC         State:       SC         State:       Sc         Disbursement For:       2012         President       Other (specify)         State:       SC         Office Sought:       House         President       Disbursement For:         Value Name (Last, First, Middle Initial)       Date of Disbursement         City       State       Zip Code         Mailing Address:       425 Second Street NE         City       State       Zip Code         Washington       DC       20002         Purpose of Disbursement       Other (specify)       Transaction ID : C7278120D408D112326         Amount of Each Disbursement this Period       Senate       Primary         Office Sought:       House       Disbursement For:       2012         Office Sought:       House       Di													
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Candidate Name       Category/ Type       Category/ Type         Office Sought:       House Senate       Disbursement For: 2012 President       Category/ Type         State:       SC       District: 05       Other (specify) ✓         Full Name (Last, First, Middle Initial)       Disbursement For: 2012       Date of Disbursement         Mailing Address 425 Second Street NE       Disbursement DC       Date of Disbursement         City       State       Zip Code 20002         Washington       DC       20002         Purpose of Disbursement 2012 Contribution       Office Sought:       Disbursement For: 2012         Office Sought:       House       Disbursement For: 2012       Amount of Each Disbursement this Period         Office Sought:       Disbursement For: 2012       Transaction ID : C7278120D408D112326         Mational Republican Senatorial Committee       Office Sought:       Disbursement For: 2012         Office Sought:       House       Disbursement For: 2012       Transaction ID : C7278120D408D112326         State:       Disbursement For: 2012       Other (specify) ✓       Toon of the contribution				044									
John Michael Mulvaney       Category/ Type         Office Sought:       House Senate President       Disbursement For: 2012 President         State:       SC       District:       05         Full Name (Last, First, Middle Initial)       Date of Disbursement         City       State       Zip Code DC         Washington       DC       20002         Prupose of Disbursement 2012 Contribution       011 Category/ Type       Transaction ID : C7278120D408D112326         Amount of Each Disbursement 2012 Contribution       Disbursement For: 2012 Disbursement For: 2012       011 Category/ Type         Office Sought:       House President       Disbursement For: 2012 Disbursement For: 2012       011 Category/ Type         State:       Disbursement For: 2012 Disbursement For: 2012 Contribution       011 Category/ Type       15000.00													
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The Northwestern Mutual Life Inst	urance Company Feo	deral	PA	C											
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A. Tim Johnson for South Dakota Inc					Date o	_	burse	ment							
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