



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="139753.89"/>	<input type="text" value="139753.89"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="85374.63"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="17357.07"/>	<input type="text" value="316699.61"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="102731.70"/>	<input type="text" value="456453.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3723.95"/>	<input type="text" value="357445.75"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="99007.75"/>	<input type="text" value="99007.75"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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

Report Covering the Period: From:  /  /  To:  /  /

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).....	15575.46	275401.71
(ii) Unitemized .....	1781.61	35793.88
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	17357.07	311195.59
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	17357.07	311195.59
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	4.02
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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))..... ▶	17357.07	316699.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	17357.07	316699.61

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	223.95	2370.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	223.95	2370.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	350000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	75.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	75.00
29. Other Disbursements .....	0.00	5000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3723.95	357445.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3723.95	357445.75

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	17357.07	311195.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	75.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17357.07	311120.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	223.95	2370.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	223.95	2370.75

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. Steven Fay Abbass**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9 Woodhull Ct  
City Northport State NY Zip Code 11768-2844  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed  
Occupation General Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-69**  
Amount of Each Receipt this Period  
125.00

**B. Rick A. Abell**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8075 Chestnut Ct  
City Granite Bay State CA Zip Code 95746-8833  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed  
Occupation General Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-57**  
Amount of Each Receipt this Period  
125.00

**C. Mark J. Backe**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4419 N Wildwood Ave  
City Shorewood State WI Zip Code 53211-1408  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML  
Occupation VP Ins & Ops Counsel  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 418.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-664**  
Amount of Each Receipt this Period  
22.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 272.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. David A. Barras**  
Full Name (Last, First, Middle Initial)

Mailing Address 8700 W Bennington Ct

City Mequon State WI Zip Code 53097-3440

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

Name of Employer NML Occupation Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **368.00**

Date of Receipt **10 / 15 / 2014**

**Transaction ID : 2014101319752-682**

Amount of Each Receipt this Period **200.00**

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

Mailing Address N46W5455 Spring Ct

City Cedarburg State WI Zip Code 53012-2547

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

Name of Employer NML Occupation VP Planning & Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **10 / 15 / 2014**

**Transaction ID : 2014101319752-811**

Amount of Each Receipt this Period **40.00**

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

Mailing Address 5413 Mount Corcoran PI

City Burke State VA Zip Code 22015-2188

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

Name of Employer NML Occupation VP Federal Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1045.00**

Date of Receipt **10 / 15 / 2014**

**Transaction ID : 2014101319752-557**

Amount of Each Receipt this Period **55.00**

**SUBTOTAL** of Receipts This Page (optional)..... **115.00**

**TOTAL** This Period (last page this line number only).....



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. J. Philip Bender**  
Full Name (Last, First, Middle Initial)  
Mailing Address 116 Belden Hill Rd  
City Wilton State CT Zip Code 06897-2911  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed  
Occupation General Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101712249-36**  
Amount of Each Receipt this Period  
50.00

**B. Beth M. Berger**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4141 N Murray Ave  
City Shorewood State WI Zip Code 53211-2011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML  
Occupation Ast Gn Cnl & Ast Sec/Secur  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 653.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-552**  
Amount of Each Receipt this Period  
35.00

**C. Dwaan C. Black**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3520 Dumbarton Rd NW  
City Atlanta State GA Zip Code 30327-2614  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed  
Occupation General Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 798.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101712249-28**  
Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 127.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Garrett J. Bleakley</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141017122249-8</b>
Mailing Address 5460 Chelsea Ave		Amount of Each Receipt this Period 75.00
City La Jolla	State CA	Zip Code 92037-7607
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	
Occupation General Insurance Agent		Aggregate Year-to-Date ▼ 1425.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Debra Blevons</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141017122249-68</b>
Mailing Address 165 Pine Ct		Amount of Each Receipt this Period 100.00
City Appleton	State WI	Zip Code 54914-8222
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	
Occupation General Insurance Agent		Aggregate Year-to-Date ▼ 1900.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Timothy John Bohannon</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141017122249-10</b>
Mailing Address 8677 Alvarado Ct		Amount of Each Receipt this Period 208.00
City Inver Grove	State MN	Zip Code 55077-3121
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	
Occupation General Insurance Agent		Aggregate Year-to-Date ▼ 3952.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	383.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 10260 N Range Line C

City Mequon	State WI	Zip Code 53092
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FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP Disability Income
-------------------------	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1444.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : 2014101319752-823**

Amount of Each Receipt this Period  
76.00

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

Mailing Address 641 5th Ave

City New York	State NY	Zip Code 10022-5908
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FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation Director
-------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : 2014101319752-838**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 12877 N Cobblestone Ct

City Mequon	State WI	Zip Code 53097-1812
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FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP Div & Inclusion
-------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : 2014101319752-859**

Amount of Each Receipt this Period  
40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	141.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Kristofer D. Breitzman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W290N3649 Tall Tree Ct  
 City Pewaukee State WI Zip Code 53072-3152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-947**  
 Amount of Each Receipt this Period  
 14.00

**B. Anne T. Brower**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2314 E Edgewood Ave  
 City Shorewood State WI Zip Code 53211-2939  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Ast Gn Cnl & Ast Sec/Secur  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 394.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-539**  
 Amount of Each Receipt this Period  
 22.00

**C. Paul S. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7111 W Greyhawk Ln  
 City Franklin State WI Zip Code 53132-8023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Director Analytics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1006**  
 Amount of Each Receipt this Period  
 13.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	49.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Matthew J. Bryant**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1900 Norhardt Dr  
 City Brookfield State WI Zip Code 53045-5087  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Lead Bus Cons  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **202.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-758**  
 Amount of Each Receipt this Period  
**100.00**

**B. Pency P. Byhardt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W148N10042 Windsong Cir E  
 City Germantown State WI Zip Code 53022-5274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Annuity Operations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **380.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1027**  
 Amount of Each Receipt this Period  
**20.00**

**C. Michael T. Byrne**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 395 La Casa Via  
 City Walnut Creek State CA Zip Code 94598-4842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3952.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-26**  
 Amount of Each Receipt this Period  
**208.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>238.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Susan W. Callanan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2736 N Shepard Ave  
 City Milwaukee State WI Zip Code 53211-3852  
 Name of Employer NML Occupation Director- Mktplc Policy and Op  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 382.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-1064**  
 Amount of Each Receipt this Period 22.00

**B. Michael G. Carter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7322 N Mohawk Rd  
 City Fox Point State WI Zip Code 53217-3454  
 Name of Employer NML Occupation EVP & CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3952.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-968**  
 Amount of Each Receipt this Period 208.00

**C. Greg Castronovo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 Evening Star Ln  
 City Bozeman State MT Zip Code 59715-7738  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 798.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 20141017122249-43**  
 Amount of Each Receipt this Period 42.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 272.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

Mailing Address 12 High Meadow Ln

City Amherst State NH Zip Code 03031-2554

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2375.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 20141017122249-42**

Amount of Each Receipt this Period 125.00

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

Mailing Address N55W21701 Adamdale Dr

City Menomonee Falls State WI Zip Code 53051-6272

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

Name of Employer NML Occupation Pres & CEO Wealth Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1589.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-703**

Amount of Each Receipt this Period 95.00

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

Mailing Address 923 E Kilbourn Ave

City Milwaukee State WI Zip Code 53202-3493

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

Name of Employer NML Occupation Svp Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2660.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-678**

Amount of Each Receipt this Period 140.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. R. Michael Condrey**  
Full Name (Last, First, Middle Initial)

Mailing Address 907 Williamson Dr

City Raleigh State NC Zip Code 27608-2307

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-3**

Amount of Each Receipt this Period  
208.00

**B. Tait Cruse**  
Full Name (Last, First, Middle Initial)

Mailing Address 2961 Belclaire Dr

City Frisco State TX Zip Code 75034-5969

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-32**

Amount of Each Receipt this Period  
208.00

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

Mailing Address 6251 S Billings Way

City Centennial State CO Zip Code 80111-6009

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2375.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-23**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 541.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Matthew S. Dean**  
Full Name (Last, First, Middle Initial)

Mailing Address 5635 N Shore Dr

City State Zip Code  
Whitefish Bay WI 53217-4860

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

Name of Employer Occupation  
NML Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-729**

Amount of Each Receipt this Period  
12.00

**B. Chad D. Dern**  
Full Name (Last, First, Middle Initial)

Mailing Address 624 E Beaumont Ave

City State Zip Code  
Whitefish Bay WI 53217-4809

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

Name of Employer Occupation  
NML Dir Brand & Adv Strat

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-782**

Amount of Each Receipt this Period  
19.00

**C. Blane Dexheimer**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 Sheffield Dr

City State Zip Code  
Brookfield WI 53005-7926

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

Name of Employer Occupation  
NML Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-556**

Amount of Each Receipt this Period  
12.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 43.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Paul Dodd</b>		Date of Receipt 10 / 15 / 2014 <b>Transaction ID : 20141017122249-29</b>
Mailing Address 7078 E Genesee St		Amount of Each Receipt this Period 208.00
City Fayetteville	State NY	
Zip Code 13066-1123		Amount of Each Receipt this Period 208.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation General Insurance Agent	Amount of Each Receipt this Period 208.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3952.00	

Full Name (Last, First, Middle Initial) <b>B. Steven Dugal</b>		Date of Receipt 10 / 15 / 2014 <b>Transaction ID : 20141017122249-30</b>
Mailing Address 9 Falcon Dr		Amount of Each Receipt this Period 208.00
City Mandeville	State LA	
Zip Code 70471-2952		Amount of Each Receipt this Period 208.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation General Insurance Agent	Amount of Each Receipt this Period 208.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3952.00	

Full Name (Last, First, Middle Initial) <b>C. John E. Dunn</b>		Date of Receipt 10 / 15 / 2014 <b>Transaction ID : 2014101319752-631</b>
Mailing Address N71W31034 Lower Club Cir W		Amount of Each Receipt this Period 50.00
City Hartland	State WI	
Zip Code 53029-8716		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		
Name of Employer NML	Occupation VP & Ipas Cnsl	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	466.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. James R. Eben**  
Full Name (Last, First, Middle Initial)

Mailing Address 14270 Woodmount Dr

City Brookfield State WI Zip Code 53005-2389

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

Name of Employer NML Occupation Ast Gn Cnl & Ast Sec/Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-991**

Amount of Each Receipt this Period  
 14.00

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

Mailing Address 2520 Hanford Ln

City Aurora State IL Zip Code 60502-6969

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-34**

Amount of Each Receipt this Period  
 208.00

**C. R. David Ells**  
Full Name (Last, First, Middle Initial)

Mailing Address 3722 W Grace Ave

City Mequon State WI Zip Code 53092-2760

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

Name of Employer NML Occupation VP Investment Strat

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 645.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-878**

Amount of Each Receipt this Period  
 27.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 249.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

**A. Keith A. Erhard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4807 Timberwood Ct  
 City West Des Moines State IA Zip Code 50265-5447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed  
 Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 798.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-18**  
 Amount of Each Receipt this Period  
 42.00

**B. John C. Ertz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18235 Shaker Blvd  
 City Shaker Heights State OH Zip Code 44120-1754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed  
 Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-17**  
 Amount of Each Receipt this Period  
 125.00

**C. Christina H. Fiasca**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9230 N Fairway Dr  
 City Bayside State WI Zip Code 53217-1317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Product Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-904**  
 Amount of Each Receipt this Period  
 50.00

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

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

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

FOR LINE NUMBER: PAGE 21 OF 82  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Nancy Filsinger**

Mailing Address 3838 N Oakland Ave

City Shorewood State WI Zip Code 53211-2258

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

Name of Employer NML Occupation Dir Fac & Workplace Mgmt

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **266.00**

Date of Receipt  
**10 / 15 / 2014**  
**Transaction ID : 2014101319752-764**

Amount of Each Receipt this Period  
**14.00**

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

Mailing Address 369 Sunshine Dr

City Hartland State WI Zip Code 53029-8559

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

Name of Employer NML Occupation Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt  
**10 / 15 / 2014**  
**Transaction ID : 2014101319752-907**

Amount of Each Receipt this Period  
**15.00**

Full Name (Last, First, Middle Initial)  
**C. Donald Forecki**

Mailing Address 208 Laurel Ln

City South Milwaukee State WI Zip Code 53172-1071

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

Name of Employer NML Occupation Dir Inv Ops

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt  
**10 / 15 / 2014**  
**Transaction ID : 2014101319752-774**

Amount of Each Receipt this Period  
**15.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **44.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Lee M. Fortenberry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 114 Lake Ridge Dr  
 City Madison State MS Zip Code 39110-8291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed  
 Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-44**  
 Amount of Each Receipt this Period  
 42.00

**B. Gerald E. Fradin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 Belle Ave  
 City Highland Park State IL Zip Code 60035-2504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Wmc Inv Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-591**  
 Amount of Each Receipt this Period  
 20.00

**C. Lance P. Franczyk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2224 E 24th St  
 City Tulsa State OK Zip Code 74114-2912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed  
 Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-45**  
 Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 137.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Stephen J. Frankl**

Mailing Address 3225 Somers Ln

City Port Washington State WI Zip Code 53074-9503

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

Name of Employer NML Occupation Reg Sales Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **397.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2014			

**Transaction ID : 2014101319752-1054**

Amount of Each Receipt this Period  

									19.00

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

Mailing Address 4 Windy Hill Ln

City Wayland State MA Zip Code 01778-2613

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2375.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2014			

**Transaction ID : 20141017122249-16**

Amount of Each Receipt this Period  

									125.00

Full Name (Last, First, Middle Initial)  
**C. Anne A. Frigo**

Mailing Address 4856 N Woodruff Ave

City Whitefish Bay State WI Zip Code 53217-5964

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

Name of Employer NML Occupation Director Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **254.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2014			

**Transaction ID : 2014101319752-637**

Amount of Each Receipt this Period  

									14.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>158.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Sheila M. Gavin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5735 N Crestwood Blvd  
 City Glendale State WI Zip Code 53209-4309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Ast Gn Cnl & Ast Sec/Ins  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-1031**  
 Amount of Each Receipt this Period 19.00

**B. Chris K. Gawart**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1610 N Prospect Ave  
 City Milwaukee State WI Zip Code 53202-6702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP & Tax Cnsl  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-639**  
 Amount of Each Receipt this Period 25.00

**C. Timothy J. Gerend**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5421 N Idlewild Ave  
 City Whitefish Bay State WI Zip Code 53217-5331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Svp Agencies  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1802.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-624**  
 Amount of Each Receipt this Period 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 154.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Walter M. Givler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13040 W Hawthorne Ln  
 City New Berlin State WI Zip Code 53151-8742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Solvency Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-618**  
 Amount of Each Receipt this Period  
 15.00

**B. Mitchell B. Glover**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6700 Old Darby Trl NE  
 City Ada State MI Zip Code 49301-8360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-14**  
 Amount of Each Receipt this Period  
 208.00

**C. Kimberley Goode**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2485 W Fairy Chasm Rd # R  
 City River Hills State WI Zip Code 53217-1536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Comm & Corp Aff  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1683.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-569**  
 Amount of Each Receipt this Period  
 93.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 316.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Patrick K. Gores**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2702 28th Ave S

City Fargo	State ND	Zip Code 58103-5045
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **798.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : 20141017122249-7**

Amount of Each Receipt this Period  

42.00
-------

**B. Tom Goris Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4735 Wellington Dr

City Long Grove	State IL	Zip Code 60047-5223
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2950.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : 20141017122249-27**

Amount of Each Receipt this Period  

170.00
--------

**C. Karl G. Gouverneur**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12895 N Cobblestone Ct

City Mequon	State WI	Zip Code 53097-1812
----------------	-------------	------------------------

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

Name of Employer NML	Occupation VP & Chief Tech Officer
-------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1273.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : 2014101319752-1086**

Amount of Each Receipt this Period  

67.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>279.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Todd Matthew Grabner**  
Full Name (Last, First, Middle Initial)

Mailing Address 2059 E Lambourne Ave

City Salt Lake Cty State UT Zip Code 84109-2436

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

Name of Employer Self-Employed  
General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
General Insurance Agent

Aggregate Year-to-Date ▼  
625.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-71**

Amount of Each Receipt this Period  
125.00

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

Mailing Address 7860 N Club Cir

City Fox Point State WI Zip Code 53217-2939

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

Name of Employer NML Occupation  
Svp Ins & Invest Prod

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2764.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-1011**

Amount of Each Receipt this Period  
208.00

**C. Stephen Gross**  
Full Name (Last, First, Middle Initial)

Mailing Address 1022 Savonne Ct

City Chesterfield State MO Zip Code 63005-4977

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

Name of Employer Self-Employed  
General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
General Insurance Agent

Aggregate Year-to-Date ▼  
1791.62

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-46**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 458.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address W73N377 Mulberry Ave

City Cedarburg State WI Zip Code 53012-2648

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

Name of Employer NML Occupation VP Field Rewards

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1465.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 2014101319752-646**

Amount of Each Receipt this Period  
**79.00**

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

Mailing Address 126 Waverly Cir

City Phoenixville State PA Zip Code 19460-2500

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **798.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141017122249-41**

Amount of Each Receipt this Period  
**42.00**

**C. Oleg Gurin**  
Full Name (Last, First, Middle Initial)

Mailing Address 11765 N Silver Ave

City Mequon State WI Zip Code 53097-3026

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

Name of Employer NML Occupation Inv Risk Mgmt Quant Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 2014101319752-760**

Amount of Each Receipt this Period  
**12.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>133.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. David Y. Hamm**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1105 Belmont Dr  
 City Waukesha State WI Zip Code 53186-6726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation App Dev Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-808**  
 Amount of Each Receipt this Period  
 14.00

**B. Jason R. Handal**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 311 W White Oak Way  
 City Mequon State WI Zip Code 53092-6248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Regional VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 237.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-732**  
 Amount of Each Receipt this Period  
 12.50

**C. Paul J. Hanson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N38W23333 Broken Hill Cir S  
 City Pewaukee State WI Zip Code 53072-2764  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1044**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	46.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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

**A. Kevin G. Hanus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18775 Brookfield Lake Dr  
 City Brookfield State WI Zip Code 53045-6170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir Restaurant Ops  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **235.00**

Date of Receipt **10 / 15 / 2014**  
**Transaction ID : 2014101319752-647**  
 Amount of Each Receipt this Period **13.00**

**B. Kevin J. Hassan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 804 Montparnasse Pl  
 City Newtown Sq State PA Zip Code 19073-2623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2375.00**

Date of Receipt **10 / 15 / 2014**  
**Transaction ID : 20141017122249-15**  
 Amount of Each Receipt this Period **125.00**

**C. Laura J. Hauschild**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14611 50th Rd  
 City Sturtevant State WI Zip Code 53177-1038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir Enterprise Solutions  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **356.00**

Date of Receipt **10 / 15 / 2014**  
**Transaction ID : 2014101319752-752**  
 Amount of Each Receipt this Period **20.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Wayne F. Heidenreich, MD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4753 N Larkin St  
 City State Zip Code  
 Whitefish Bay WI 53211-1152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NML Medical Dir/HR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 323.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1013**  
 Amount of Each Receipt this Period  
 17.00

**B. Gerard M. Hempstead**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 49 W Walling Dr  
 City State Zip Code  
 Creve Coeur MO 63141-7371  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed General Insurance Agent  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1583.27

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-56**  
 Amount of Each Receipt this Period  
 83.33

**C. Thomas R. Hendricks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8690 N Spruce Rd  
 City State Zip Code  
 River Hills WI 53217-2126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NML Asst Dir Reg Sls Team  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 418.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-972**  
 Amount of Each Receipt this Period  
 22.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	122.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3315 Graham Hill Rd

City Orono State MN Zip Code 55356-5501

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-40**

Amount of Each Receipt this Period  
208.00

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

Mailing Address 2045 Elm Tree Rd

City Elm Grove State WI Zip Code 53122-1117

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

Name of Employer NML  
Occupation VP Treas & Inv Ops

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1643.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-898**

Amount of Each Receipt this Period  
89.00

**C. Laila V. Hick**  
Full Name (Last, First, Middle Initial)

Mailing Address 10315 W Sunset Ave

City Wauwatosa State WI Zip Code 53222-2350

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

Name of Employer NML  
Occupation VP Agency Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-1004**

Amount of Each Receipt this Period  
18.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 315.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Patricia J. Hillmann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1227 N 55th St  
 City Milwaukee State WI Zip Code 53208-2519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Ico Communication Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-625**  
 Amount of Each Receipt this Period 12.00

**B. Michael T. Holloway**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 425 Lake Bluff Ln  
 City Grafton State WI Zip Code 53024-9764  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-866**  
 Amount of Each Receipt this Period 19.00

**C. Bruce Holmes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2550 W Hunter Cir  
 City Glendale State WI Zip Code 53209-1871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Senior Actuary  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-574**  
 Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

**A. Steve H. Holter**  
Full Name (Last, First, Middle Initial)

Mailing Address 11390 N Creekside Ct

City Mequon State WI Zip Code 53092-4377

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

Name of Employer Self-Employed  
General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
General Insurance Agent

Aggregate Year-to-Date ▼  
3952.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-49**

Amount of Each Receipt this Period  
208.00

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

Mailing Address 1701 E Westminster Ln

City Spokane State WA Zip Code 99223-6712

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

Name of Employer Self-Employed  
General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
General Insurance Agent

Aggregate Year-to-Date ▼  
798.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-4**

Amount of Each Receipt this Period  
42.00

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

Mailing Address 1930 Old Court Rd

City Ruxton State MD Zip Code 21204-1849

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

Name of Employer Self-Employed  
General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
General Insurance Agent

Aggregate Year-to-Date ▼  
2375.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-21**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 375.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 23702 Champe Ford Rd

City Middleburg	State VA	Zip Code 20117-2940
--------------------	-------------	------------------------

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

Name of Employer NML	Occupation Regional Director
-------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : 2014101319752-928**

Amount of Each Receipt this Period  
27.00

**B. Meg E. Jansky**  
Full Name (Last, First, Middle Initial)

Mailing Address 4611 N Wildwood Ave

City Whitefish Bay	State WI	Zip Code 53211-1123
-----------------------	-------------	------------------------

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

Name of Employer NML	Occupation VP Field Services & Support
-------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
204.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : 2014101319752-958**

Amount of Each Receipt this Period  
12.00

**C. Ronald P. Joelson**  
Full Name (Last, First, Middle Initial)

Mailing Address 825 N Prospect Ave  
# U

City Milwaukee	State WI	Zip Code 53202-3979
-------------------	-------------	------------------------

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

Name of Employer NML	Occupation EVP & CIO
-------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : 2014101319752-522**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	339.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 36 OF 82  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Todd M. Jones**

Mailing Address W252N4956 Aberdeen Dr

City State Zip Code  
 Pewaukee WI 53072-1351

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

Name of Employer Occupation  
 NML VP & Chief Risk Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1278.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-794**

Amount of Each Receipt this Period  
 78.00

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

Mailing Address 16 Vintage Walk

City State Zip Code  
 Montgomery OH 45249-2101

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

Name of Employer Occupation  
 Self-Employed General Insurance Agent

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-62**

Amount of Each Receipt this Period  
 125.00

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

Mailing Address 5806 N Kent Ave

City State Zip Code  
 Whitefish Bay WI 53217-4612

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

Name of Employer Occupation  
 NML VP & Controller

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1159.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-616**

Amount of Each Receipt this Period  
 61.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 264.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 8930 Dunn Ct

City Dublin State OH Zip Code 43017-8880

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **798.00**

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-58**

Amount of Each Receipt this Period  
**42.00**

**B. Martha M. Kendler**  
Full Name (Last, First, Middle Initial)

Mailing Address 1775 Village Green Ct # C

City Elm Grove State WI Zip Code 53122-1164

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

Name of Employer NML Occupation Dir Business Markets

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **266.00**

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-532**

Amount of Each Receipt this Period  
**14.00**

**C. David Daniel Kiecker**  
Full Name (Last, First, Middle Initial)

Mailing Address 11696 Approach Blvd

City Fishers State IN Zip Code 46037-4146

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1213.00**

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-67**

Amount of Each Receipt this Period  
**125.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **181.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 4645 Swilcan Bridge Ln S

City Jacksonville State FL Zip Code 32224-5621

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2375.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 20141017122249-12**

Amount of Each Receipt this Period 125.00

**B. Sarah L. N. Koenig**  
Full Name (Last, First, Middle Initial)

Mailing Address W150N10997 Dogwood Ct

City Germantown State WI Zip Code 53022-4287

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

Name of Employer NML Occupation Dir Horizontal Growth

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-626**

Amount of Each Receipt this Period 13.00

**C. Kevin J. Konopa**  
Full Name (Last, First, Middle Initial)

Mailing Address 2812 River Point Ct

City Waukesha State WI Zip Code 53189-6841

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

Name of Employer NML Occupation Dir Client Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-979**

Amount of Each Receipt this Period 13.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 151.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. John L. Kordsmeier**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2522 W Daphne Rd  
 City Glendale State WI Zip Code 53209-3300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Strat Phil & Comm Rel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1767.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1035**  
 Amount of Each Receipt this Period  
 93.00

**B. Steven H. Kosnick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5799 Windsona Cir  
 City Fitchburg State WI Zip Code 53711-5839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 798.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-6**  
 Amount of Each Receipt this Period  
 42.00

**C. Carol L. Kracht**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3357 N Lake Dr  
 City Milwaukee State WI Zip Code 53211-2908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Dep Gc/Sec & Board Rel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 709.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-969**  
 Amount of Each Receipt this Period  
 43.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	178.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 40 OF 82  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Ryan J. Kramer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 906 E Glenbrook Rd  
 City Bayside State WI Zip Code 53217-1437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Asst Regional Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-585**  
 Amount of Each Receipt this Period  
 13.00

**B. Donald H. Larson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 450 Freedom Ct  
 City Gurnee State IL Zip Code 60031-4493  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir Itoi (Comp Ops)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-607**  
 Amount of Each Receipt this Period  
 14.00

**C. Todd L. Laszewski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2604 N 90th St  
 City Wauwatosa State WI Zip Code 53226-1813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir, Life Product Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 399.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-884**  
 Amount of Each Receipt this Period  
 21.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 48.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. M. Kevin Lawhon**  
Full Name (Last, First, Middle Initial)

Mailing Address 6952 Burnt Sienna Cir

City Naples State FL Zip Code 34109-7826

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

Name of Employer Self-Employed  
General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
General Insurance Agent

Aggregate Year-to-Date ▼  
1583.27

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-52**

Amount of Each Receipt this Period  
83.33

**B. Elizabeth J. Lentini**  
Full Name (Last, First, Middle Initial)

Mailing Address 5525 N Hollywood Ave

City Whitefish Bay State WI Zip Code 53217-5207

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

Name of Employer NML  
Occupation Chief Compliance Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-1074**

Amount of Each Receipt this Period  
15.00

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

Mailing Address 1108 W Goldthread Cir

City Sioux Falls State SD Zip Code 57108-2824

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

Name of Employer Self-Employed  
General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation  
General Insurance Agent

Aggregate Year-to-Date ▼  
798.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-11**

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.33

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Erika K. Luckow**  
Full Name (Last, First, Middle Initial)

Mailing Address N102W14232 Gatewood Pl

City State Zip Code  
Germantown WI 53022-5320

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

Name of Employer Occupation  
NML Dir- Strategic Communication

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-694**

Amount of Each Receipt this Period  
12.00

**B. Matthew James Lueder**  
Full Name (Last, First, Middle Initial)

Mailing Address 2359 N Wahl Ave

City State Zip Code  
Milwaukee WI 53211-4513

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

Name of Employer Occupation  
Self-Employed General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
798.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 20141017122249-66**

Amount of Each Receipt this Period  
42.00

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

Mailing Address 1213 E Goodrich Ln

City State Zip Code  
Fox Point WI 53217-2946

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

Name of Employer Occupation  
NML Svp Securities

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3192.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-894**

Amount of Each Receipt this Period  
168.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	222.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Stephanie A. Lyons</b>		Date of Receipt 10 / 15 / 2014 <b>Transaction ID : 2014101319752-731</b>
Mailing Address 809 E Sylvan Ave		Amount of Each Receipt this Period 19.00
City Whitefish Bay	State WI	Zip Code 53217-5353
FEC ID number of contributing federal political committee. C		
Name of Employer NML	Occupation Dir Strat Plng & Cnsltg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.00	

Full Name (Last, First, Middle Initial) <b>B. David C. Magoon</b>		Date of Receipt 10 / 15 / 2014 <b>Transaction ID : 2014101319752-540</b>
Mailing Address N31W23910 Old Farm Ct		Amount of Each Receipt this Period 20.00
City Pewaukee	State WI	Zip Code 53072-4090
FEC ID number of contributing federal political committee. C		
Name of Employer NML	Occupation Sys Adm Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) <b>C. Cory A. Mahaffey</b>		Date of Receipt 10 / 15 / 2014 <b>Transaction ID : 20141017122249-61</b>
Mailing Address 13764 Knaus Rd		Amount of Each Receipt this Period 42.00
City Lake Oswego	State OR	Zip Code 97034-2175
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 798.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	81.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 7236 N Crossway Rd

City Fox Point State WI Zip Code 53217-3519

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

Name of Employer NML Occupation Svp Gen Cnsl & Sec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3952.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-565**

Amount of Each Receipt this Period 208.00

**B. Steven C. Mannebach**  
Full Name (Last, First, Middle Initial)

Mailing Address 7818 Rogers Ave

City Wauwatosa State WI Zip Code 53213-1761

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

Name of Employer NML Occupation VP Field Growth & Dev

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1139.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-683**

Amount of Each Receipt this Period 77.00

**c. Jeffrey S. Marks**  
Full Name (Last, First, Middle Initial)

Mailing Address 8232 S Country Club Cir

City Franklin State WI Zip Code 53132-8532

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

Name of Employer NML Occupation Dir Reqts & Multi- Life

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-584**

Amount of Each Receipt this Period 19.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 304.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. David C. Mc Avoy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Mountview Rd  
 City Wellesley State MA Zip Code 02481-2757  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed  
 Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-2**  
 Amount of Each Receipt this Period  
 208.00

**B. Brian W. McClure**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1402 Wyndemere Point Dr  
 City Champaign State IL Zip Code 61822-3349  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed  
 Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 798.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-64**  
 Amount of Each Receipt this Period  
 42.00

**C. James B. McDonald**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6294 Homar Pond Ct  
 City Fairfax Station State VA Zip Code 22039-1653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML  
 Occupation Associate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 323.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1036**  
 Amount of Each Receipt this Period  
 17.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 267.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

Mailing Address 2571 N 86th St

City Wauwatosa State WI Zip Code 53226-1921

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

Name of Employer NML Occupation VP Ips Bus Dev

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **674.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-599**

Amount of Each Receipt this Period  
**38.00**

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

Mailing Address 205 E 4th St

City Hinsdale State IL Zip Code 60521-4603

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3952.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-5**

Amount of Each Receipt this Period  
**208.00**

**C. Daniel J. Meehan**  
Full Name (Last, First, Middle Initial)

Mailing Address N30W6890 Lincoln Blvd

City Cedarburg State WI Zip Code 53012-2266

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

Name of Employer NML Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **254.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-568**

Amount of Each Receipt this Period  
**14.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **260.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Jim E. Meeks Jr.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141017122249-20</b>
Mailing Address 2460 Lennox Dr		Amount of Each Receipt this Period 62.50
City Germantown	State TN	Zip Code 38138-4925
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1187.50	

Full Name (Last, First, Middle Initial) <b>B. Arthur J. Mees, Jr.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 2014101319752-1069</b>
Mailing Address 5347 N Hollywood Ave		Amount of Each Receipt this Period 23.00
City Whitefish Bay	State WI	Zip Code 53217-5324
FEC ID number of contributing federal political committee. C		
Name of Employer NML	Occupation Regional Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph F. Meier</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141017122249-9</b>
Mailing Address 208 Long Acres Ln		Amount of Each Receipt this Period 42.00
City Oviedo	State FL	Zip Code 32765-7843
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 910.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	127.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Kip A. Meierhofer**  
Full Name (Last, First, Middle Initial)

Mailing Address N65W4855 Cedar Reserve Cir

City Cedarburg State WI Zip Code 53012-3502

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

Name of Employer NML Occupation Dir Business Architecture

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **209.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 2014101319752-860**

Amount of Each Receipt this Period  
**11.00**

**B. Ben Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 11315 E Wincomb Dr

City Scottsdale State AZ Zip Code 85255-1638

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141017122249-55**

Amount of Each Receipt this Period  
**125.00**

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

Mailing Address 214 Schenley Rd

City Pittsburgh State PA Zip Code 15217-1171

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3952.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141017122249-39**

Amount of Each Receipt this Period  
**208.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **344.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Christian Mitchell</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 2014101319752-628</b>
Mailing Address 640 E Carlisle Ave		Amount of Each Receipt this Period 50.00
City Whitefish Bay	State WI	Zip Code 53217-4832
FEC ID number of contributing federal political committee. C	Name of Employer NML	Occupation VP Corp Plng
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

Full Name (Last, First, Middle Initial) <b>B. Loretta Mlekoday</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 2014101319752-1052</b>
Mailing Address 7621 N Van Dyke Rd		Amount of Each Receipt this Period 12.00
City Fox Point	State WI	Zip Code 53217-3253
FEC ID number of contributing federal political committee. C	Name of Employer NML	Occupation App Dev Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	

Full Name (Last, First, Middle Initial) <b>C. Karen A. Molloy</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 2014101319752-877</b>
Mailing Address 2004 N 85th St		Amount of Each Receipt this Period 20.00
City Wauwatosa	State WI	Zip Code 53226-2846
FEC ID number of contributing federal political committee. C	Name of Employer NML	Occupation VP Treasurer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	82.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Scott J. Morris**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4406 N Madero Drive  
City Mequon State WI Zip Code 53092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML Occupation Ast Gn Cnl & Ast Sec -Tax/HR  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-1046**  
Amount of Each Receipt this Period 15.00

**B. Martin A. Moser**  
Full Name (Last, First, Middle Initial)  
Mailing Address 378 Juniper Ct  
City Grafton State WI Zip Code 53024-2270  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML Occupation Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 342.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-597**  
Amount of Each Receipt this Period 18.00

**C. Timothy Nelson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3518 17th St  
City Kenosha State WI Zip Code 53144-3339  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML Occupation Regional VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 247.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-858**  
Amount of Each Receipt this Period 13.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 46.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 51 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Jeremy D. Newman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1140 Lone Tree Rd  
 City Elm Grove State WI Zip Code 53122-2019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir Field Strategy & Serv  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1075**  
 Amount of Each Receipt this Period  
 14.00

**B. Sherry L. Noll**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8329 Gittings Rd  
 City Mount Pleasant State WI Zip Code 53406-2113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Asst Dir Risk Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-954**  
 Amount of Each Receipt this Period  
 12.00

**C. William H. Norton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10145 Wavell Rd  
 City Fairfax State VA Zip Code 22032-2337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Regional Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 859.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-529**  
 Amount of Each Receipt this Period  
 37.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	63.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Kevin O Connell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4807 W Woodmere Rd  
 City Tampa State FL Zip Code 33609-3632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **364.38**

Date of Receipt **10 / 15 / 2014**  
**Transaction ID : 20141017122249-70**  
 Amount of Each Receipt this Period **121.46**

**B. Daniel J. O Meara**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W70N385 Foxpointe Ave  
 City Cedarburg State WI Zip Code 53012-2232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Agency Dev & Pgrms  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **494.00**

Date of Receipt **10 / 15 / 2014**  
**Transaction ID : 2014101319752-713**  
 Amount of Each Receipt this Period **26.00**

**C. John K. O Meara**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1083 N Perry Ct  
 City Wauwatosa State WI Zip Code 53213-3158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir Adv Plng  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **266.00**

Date of Receipt **10 / 15 / 2014**  
**Transaction ID : 2014101319752-1012**  
 Amount of Each Receipt this Period **14.00**

**SUBTOTAL** of Receipts This Page (optional)..... **161.46**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Mary Joy O Meara**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4325 N Morris Blvd  
 City Shorewood State WI Zip Code 53211-1547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Regional Dir  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **323.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-738**  
 Amount of Each Receipt this Period  
**17.00**

**B. Gregory C. Oberland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4746 N Cumberland Blvd  
 City Whitefish Bay State WI Zip Code 53211-1147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3952.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-587**  
 Amount of Each Receipt this Period  
**208.00**

**C. Anthony Oliver**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7704 S Pine Ave  
 City Oak Creek State WI Zip Code 53154-2345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation App Dev Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **216.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-671**  
 Amount of Each Receipt this Period  
**12.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>237.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Kevin K. Olp</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 2014101319752-674</b>
Mailing Address 13140 W North Ln		Amount of Each Receipt this Period 94.00
City New Berlin	State WI	Zip Code 53151-9007
FEC ID number of contributing federal political committee. C	Name of Employer NML	Occupation Dir Creat Svcs Sol & Co Init
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	

Full Name (Last, First, Middle Initial) <b>B. Christen L. Partleton</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 2014101319752-845</b>
Mailing Address 4832 N Shoreland Ave		Amount of Each Receipt this Period 38.00
City Whitefish Bay	State WI	Zip Code 53217-5821
FEC ID number of contributing federal political committee. C	Name of Employer NML	Occupation VP Facility Ops
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 686.00	

Full Name (Last, First, Middle Initial) <b>C. Brian G. Petrando</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2014 <b>Transaction ID : 20141017122249-24</b>
Mailing Address 9533 Marbella Dr		Amount of Each Receipt this Period 42.00
City Fort Worth	State TX	Zip Code 76126-1935
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	Occupation General Insurance Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 798.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	94.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

**A. William C. Pickering**  
Full Name (Last, First, Middle Initial)

Mailing Address 1823 N 81st St

City Wauwatosa State WI Zip Code 53213-2146

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

Name of Employer NML Occupation Ast Gn Cnl & Ast Sec/Intl Pro

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1021**

Amount of Each Receipt this Period  
 15.00

**B. Michele E. Pierz**  
Full Name (Last, First, Middle Initial)

Mailing Address 9648 N Old Barn Rd

City Mequon State WI Zip Code 53092-6231

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

Name of Employer NML Occupation Dir Field Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 344.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-533**

Amount of Each Receipt this Period  
 20.00

**C. Matthew J. Plocher**  
Full Name (Last, First, Middle Initial)

Mailing Address 4324 Chevy Chase Dr

City La Canada State CA Zip Code 91011-3203

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-48**

Amount of Each Receipt this Period  
 125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 160.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Michael E. Pritzl**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 572 Cottonwood Ln  
 City Grafton State WI Zip Code 53024-9591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Managing Director Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-955**  
 Amount of Each Receipt this Period 300.00

**B. Charles R. Pruett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1019 Stonewall Dr  
 City Nashville State TN Zip Code 37220-1022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3952.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 20141017122249-50**  
 Amount of Each Receipt this Period 208.00

**C. Thomas O. Rabenn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9410 N Fairway Dr  
 City Bayside State WI Zip Code 53217-1321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Regional Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-1014**  
 Amount of Each Receipt this Period 11.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 249.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Steven M. Radke**

Mailing Address 111 W Ravine Ct

City Thiensville State WI Zip Code 53092-5861

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

Name of Employer NML Occupation VP Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1007.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 2014101319752-807**

Amount of Each Receipt this Period  
**53.00**

Full Name (Last, First, Middle Initial)  
**B. Randal W. Ralph**

Mailing Address 9945 N Valley Hill Dr

City Mequon State WI Zip Code 53092-5350

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

Name of Employer NML Occupation Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **266.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 2014101319752-1039**

Amount of Each Receipt this Period  
**14.00**

Full Name (Last, First, Middle Initial)  
**C. Jeff D. Reeter**

Mailing Address 7 Williamsburg Ln

City Houston State TX Zip Code 77024-5144

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : 20141017122249-63**

Amount of Each Receipt this Period  
**125.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **192.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. David R. Remstad**  
Full Name (Last, First, Middle Initial)

Mailing Address 2634 N Lake Dr

City Milwaukee State WI Zip Code 53211-3837

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

Name of Employer NML Occupation Svp & Chief Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1792.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-743**

Amount of Each Receipt this Period  
 100.00

**B. Zhibin Ren**  
Full Name (Last, First, Middle Initial)

Mailing Address 16540 Brehon Ln

City Brookfield State WI Zip Code 53005-2747

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

Name of Employer NML Occupation Ast Gn Cnl & Ast Sec/Intl Pro

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-835**

Amount of Each Receipt this Period  
 12.00

**C. Peter K. Richardson**  
Full Name (Last, First, Middle Initial)

Mailing Address 720 E Green Tree Rd

City Fox Point State WI Zip Code 53217-3615

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

Name of Employer NML Occupation Ast Gn Cnl & Ast Sec/Ipas

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-514**

Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 132.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Wesley H. Richardson**  
Full Name (Last, First, Middle Initial)

Mailing Address 73 Oakwood Rd

City Huntington State WV Zip Code 25701-4148

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-72**

Amount of Each Receipt this Period  
100.00

**B. Daniel A. Riedl**  
Full Name (Last, First, Middle Initial)

Mailing Address 6604 Cedar St

City Wauwatosa State WI Zip Code 53213-3252

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

Name of Employer NML  
Occupation VP Fld Dist Policies & Admin

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-673**

Amount of Each Receipt this Period  
25.00

**C. J. Daniel Rivers**  
Full Name (Last, First, Middle Initial)

Mailing Address 3601 River Ridge Cv

City Prospect State KY Zip Code 40059-8038

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-22**

Amount of Each Receipt this Period  
208.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 333.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Bethany M. Rodenhuis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3900 N Lake Dr  
 City Shorewood State WI Zip Code 53211-2448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Svp Field Strat & Serv  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1881.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-630**  
 Amount of Each Receipt this Period  
 99.00

**B. Tammy M. Roo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N99W14710 Amber Dr  
 City Germantown State WI Zip Code 53022-6611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP - Era  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1045.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-800**  
 Amount of Each Receipt this Period  
 55.00

**C. Matt Russo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 139 Deep Valley Rd  
 City New Canaan State CT Zip Code 06840-2804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-54**  
 Amount of Each Receipt this Period  
 208.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	362.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. R. Philip Sarnecki**  
Full Name (Last, First, Middle Initial)

Mailing Address 18240 Melrose Dr

City Bucyrus State KS Zip Code 66013-9081

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1979.23

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-35**

Amount of Each Receipt this Period  
104.17

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

Mailing Address 8 Benedek Rd

City Princeton State NJ Zip Code 08540-2227

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3952.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-1**

Amount of Each Receipt this Period  
208.00

**C. Linda Ann Schaefer**  
Full Name (Last, First, Middle Initial)

Mailing Address 5674 Garland Ln

City Greendale State WI Zip Code 53129-1507

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

Name of Employer NML  
Occupation Dir Doc Shared Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
292.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-687**

Amount of Each Receipt this Period  
16.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 328.17

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Timothy G. Schaefer**  
Full Name (Last, First, Middle Initial)

Mailing Address 1013 E Lexington Blvd

City State Zip Code  
Whitefish Bay WI 53217-5381

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

Name of Employer Occupation  
NML EVP Ent Ops & Tech

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2776.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-844**

Amount of Each Receipt this Period  
208.00

**B. Cal D. Schattschneider**  
Full Name (Last, First, Middle Initial)

Mailing Address 5940 Stefanie Way

City State Zip Code  
Caledonia WI 53108-9563

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

Name of Employer Occupation  
NML Dir Exp Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
399.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-1024**

Amount of Each Receipt this Period  
21.00

**C. Sherri L. Schickert**  
Full Name (Last, First, Middle Initial)

Mailing Address W147N9815 Emerald Ln

City State Zip Code  
Germantown WI 53022-6620

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

Name of Employer Occupation  
NML Dir Proj/Bus Imp Serv

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-831**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 249.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1500 Greenway Ter

City Elm Grove State WI Zip Code 53122-1611

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

Name of Employer NML Occupation Chairman & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3952.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-761**

Amount of Each Receipt this Period 208.00

**B. Kathleen H. Schluter**  
Full Name (Last, First, Middle Initial)

Mailing Address 5057 N Palisades Rd

City Whitefish Bay State WI Zip Code 53217-5756

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

Name of Employer NML Occupation VP Tax Policy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 688.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-762**

Amount of Each Receipt this Period 40.00

**C. Calvin R. Schmidt**  
Full Name (Last, First, Middle Initial)

Mailing Address W205 Allen Rd

City Oconomowoc State WI Zip Code 53066-9048

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

Name of Employer NML Occupation Svp Int Cust Ops

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-783**

Amount of Each Receipt this Period 90.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 338.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Rodd Schneider**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1415 E Fairy Chasm Rd  
# R  
City Bayside State WI Zip Code 53217-1433  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML Occupation VP Litig & Dist Counsel  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 705.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-526**  
Amount of Each Receipt this Period  
39.00

**B. Sarah R. Schneider**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4380 N Wildwood Ave  
City Shorewood State WI Zip Code 53211-1436  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML Occupation VP-New Business  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 576.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-755**  
Amount of Each Receipt this Period  
36.00

**C. Todd M. Schoon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9400 N Valley Hill Rd  
# R  
City River Hills State WI Zip Code 53217-1037  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML Occupation Svp Field Relations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-1062**  
Amount of Each Receipt this Period  
208.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 283.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Sarah E. Schott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 638 W Riverview Dr  
 City Glendale State WI Zip Code 53209-4528  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Compliance/Bp  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-726**  
 Amount of Each Receipt this Period  
 300.00  
 Aggregate Year-to-Date  
 270.00

**B. Robert Seery**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 49 Green Ave  
 City Rye State NY Zip Code 10580-3141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-25**  
 Amount of Each Receipt this Period  
 125.00  
 Aggregate Year-to-Date  
 2375.00

**C. Adam David Seiden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 44 Sunset Rd  
 City Darien State CT Zip Code 06820-3527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-65**  
 Amount of Each Receipt this Period  
 208.00  
 Aggregate Year-to-Date  
 832.00

**SUBTOTAL** of Receipts This Page (optional)..... **363.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Brad P. Seitzinger**  
Full Name (Last, First, Middle Initial)

Mailing Address 920 Pine Needle Trl

City Oakland Twp State MI Zip Code 48306-1034

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3952.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 20141017122249-38**

Amount of Each Receipt this Period 208.00

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

Mailing Address 311 E Erie St Unit 4

City Milwaukee State WI Zip Code 53202-6040

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

Name of Employer NML Occupation Svp Life & Ann Products

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-1051**

Amount of Each Receipt this Period 80.00

**C. Paul W. Skalecki**  
Full Name (Last, First, Middle Initial)

Mailing Address W69N463 Foxpointe Ave # A

City Cedarburg State WI Zip Code 53012-2231

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

Name of Employer NML Occupation VP Risk Selection Strategy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 762.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-871**

Amount of Each Receipt this Period 42.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 330.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Richard P. Snyder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 909 Fairview Ave  
 City South Milwaukee State WI Zip Code 53172-1719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir Field Comp & Acctg  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-649**  
 Amount of Each Receipt this Period  
 19.00

**B. Steve P. Sperka**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address S67W17735 Copper Oaks Ct  
 City Muskego State WI Zip Code 53150-7503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Ltc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1347.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-786**  
 Amount of Each Receipt this Period  
 81.00

**C. Jason Steigman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2301 E Newton Ave  
 City Shorewood State WI Zip Code 53211-2617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 349.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-608**  
 Amount of Each Receipt this Period  
 19.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	119.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 6311 N Lake Dr

City State Zip Code  
Whitefish Bay WI 53217-4343

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

Name of Employer Occupation  
NML VP Investment Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
906.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-872**

Amount of Each Receipt this Period  
66.00

**B. Stephen R. Stone**  
Full Name (Last, First, Middle Initial)

Mailing Address 2511 N 95th St

City State Zip Code  
Wauwatosa WI 53226-1749

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

Name of Employer Occupation  
NML Erm Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-677**

Amount of Each Receipt this Period  
24.00

**C. Richard A. Strait**  
Full Name (Last, First, Middle Initial)

Mailing Address 9086 N Tennyson Dr

City State Zip Code  
Bayside WI 53217-1967

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

Name of Employer Occupation  
NML Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
399.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-1049**

Amount of Each Receipt this Period  
21.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 111.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Peter F. Striano III**  
Full Name (Last, First, Middle Initial)

Mailing Address 11050 NW 78th Pl

City Parkland State FL Zip Code 33076-4723

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2375.00**

Date of Receipt  
**10 / 15 / 2014**  
Transaction ID : **20141017122249-51**

Amount of Each Receipt this Period  
**125.00**

**B. Steven J. Stribling**  
Full Name (Last, First, Middle Initial)

Mailing Address 11830 W Whitaker Ave

City Greenfield State WI Zip Code 53228-2455

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

Name of Employer NML Occupation VP Di Benefits

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **434.00**

Date of Receipt  
**10 / 15 / 2014**  
Transaction ID : **2014101319752-1065**

Amount of Each Receipt this Period  
**26.00**

**C. Brenda J. Stugelmeyer**  
Full Name (Last, First, Middle Initial)

Mailing Address 8994 S Blackbird Trl

City Franklin State WI Zip Code 53132-8588

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

Name of Employer NML Occupation VP & Real Estate Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **655.00**

Date of Receipt  
**10 / 15 / 2014**  
Transaction ID : **2014101319752-876**

Amount of Each Receipt this Period  
**37.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **188.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Christopher P. Swain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10927 N Wyngate Trce  
 City Mequon State WI Zip Code 53092-5862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Msa Investments  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-819**  
 Amount of Each Receipt this Period 35.00

**B. Victoria A. Sweigart**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 114 Brookdale Dr  
 City South Milwaukee State WI Zip Code 53172-1215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Asst Dir Shared Svc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-953**  
 Amount of Each Receipt this Period 11.00

**C. Rachel L. Taknint**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2804 E Newberry Blvd  
 City Milwaukee State WI Zip Code 53211-3427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation IS Spec Proj Liaison  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-812**  
 Amount of Each Receipt this Period 10.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Thomas Talajkowski**  
Full Name (Last, First, Middle Initial)

Mailing Address 1550 E Cumberland Blvd

City State Zip Code  
Whitefish Bay WI 53211-1141

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

Name of Employer Occupation  
NML Dir Corp Financial Plng

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-854**

Amount of Each Receipt this Period  
20.00

**B. Elizabeth B. Taylor**  
Full Name (Last, First, Middle Initial)

Mailing Address W287N945 Bedouin Ct

City State Zip Code  
Waukesha WI 53188-9497

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

Name of Employer Occupation  
NML Dir Estate Market

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 2014101319752-1085**

Amount of Each Receipt this Period  
12.00

**C. Michael F. Tews**  
Full Name (Last, First, Middle Initial)

Mailing Address 609 S 249th Cir

City State Zip Code  
Waterloo NE 68069-4432

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

Name of Employer Occupation  
Self-Employed General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2375.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014  
**Transaction ID : 20141017122249-19**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 157.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 12505 Ventana Mesa Cir

City Castle Pines State CO Zip Code 80108-9148

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3952.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101712249-31**

Amount of Each Receipt this Period  
208.00

**B. Michael S. Treptow**  
Full Name (Last, First, Middle Initial)

Mailing Address 8207 N Gray Log Ln

City Fox Point State WI Zip Code 53217-2863

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

Name of Employer NML Occupation Dir Inv Per Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 545.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-890**

Amount of Each Receipt this Period  
35.00

**C. Alex J. Tronco**  
Full Name (Last, First, Middle Initial)

Mailing Address 11 Stoneridge Dr

City Loudonville State NY Zip Code 12211-2625

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

Name of Employer Self-Employed  
Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1187.50

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-60**

Amount of Each Receipt this Period  
62.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 305.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 73 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Chris G. Trost**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1218 E Olive St  
City Shorewood State WI Zip Code 53211-1825  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML Occupation Senior Actuary  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 413.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-606**  
Amount of Each Receipt this Period 23.00

**B. Leo C. Tucker**  
Full Name (Last, First, Middle Initial)  
Mailing Address 605 Potomac River Rd  
City Mc Lean State VA Zip Code 22102-1402  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation General Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2375.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 20141017122249-47**  
Amount of Each Receipt this Period 125.00

**C. Deborah Vandommelen, MD**  
Full Name (Last, First, Middle Initial)  
Mailing Address W66N679 Madison Ave  
City Cedarburg State WI Zip Code 53012-1819  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NML Occupation Medical Dir  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 296.00

Date of Receipt 10 / 15 / 2014  
**Transaction ID : 2014101319752-932**  
Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 168.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 74 OF 82  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Andrew T. Vedder**

Mailing Address 4856 N Bartlett Ave

City State Zip Code  
 Whitefish Bay WI 53217-6016

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

Name of Employer Occupation  
 NML Director- Erm

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1068**

Amount of Each Receipt this Period  
 23.00

Full Name (Last, First, Middle Initial)  
**B. Janine L. Wagner**

Mailing Address 1300 N Prospect Ave

City State Zip Code  
 Milwaukee WI 53202-3022

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

Name of Employer Occupation  
 NML Dir Plng & Prod Ins Cons

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 273.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-802**

Amount of Each Receipt this Period  
 15.00

Full Name (Last, First, Middle Initial)  
**C. P. Andrew Ware**

Mailing Address 7900 N Berwyn Ave

City State Zip Code  
 Glendale WI 53209-1810

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

Name of Employer Occupation  
 NML VP & Corporate Actuary

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 795.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-511**

Amount of Each Receipt this Period  
 45.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 83.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Andrew T. Wassweiler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6746 W River Terrace Dr  
 # D  
 City Franklin State WI Zip Code 53132-8363  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-792**  
 Amount of Each Receipt this Period  
 17.00

**B. Alison F. Watson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 420 Independence Ave SE  
 City Washington State DC Zip Code 20003-1046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir Fed Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-1032**  
 Amount of Each Receipt this Period  
 50.00

**C. Robert J. Welsh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address S68W17598 Marybeck Ln  
 City Muskego State WI Zip Code 53150-8556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir Employee Comp  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-926**  
 Amount of Each Receipt this Period  
 14.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	81.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Jeffrey B. Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2004 N 72nd St  
 City Wauwatosa State WI Zip Code 53213-1828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Nmis-Nmwmc Chief Compl Off  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 617.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-575**  
 Amount of Each Receipt this Period  
 35.00

**B. Kamilah D. Williams-Kemp**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2121 S Kinnickinnic Ave  
 City Milwaukee State WI Zip Code 53207-1364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Director Large Case  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 258.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-797**  
 Amount of Each Receipt this Period  
 18.00

**C. Richard Worrell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2423 Beretania Cir  
 City Charlotte State NC Zip Code 28211-3631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3166.73

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-59**  
 Amount of Each Receipt this Period  
 166.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 219.67  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. John William Wright II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 510 King Rd NW  
 City Atlanta State GA Zip Code 30342-4011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 20141017122249-37**  
 Amount of Each Receipt this Period  
**100.00**

**B. Deborah A. Yahnke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 608 E Lexington Blvd  
 City Whitefish Bay State WI Zip Code 53217-5336  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Employee Benefits Cons  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **209.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-882**  
 Amount of Each Receipt this Period  
**11.00**

**C. Brian K. Yeazel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N110W5390 W Highland Dr  
 City Cedarburg State WI Zip Code 53012-3604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Managing Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **342.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-702**  
 Amount of Each Receipt this Period  
**18.00**

**SUBTOTAL** of Receipts This Page (optional)..... **129.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Conrad C. York**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 511100  
 City Milwaukee State WI Zip Code 53203-0191  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Marketing  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1843.00**

Date of Receipt **10 / 15 / 2014**  
**Transaction ID : 2014101319752-765**  
 Amount of Each Receipt this Period **97.00**

**B. Catherine M. Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 929 N Astor Street Unit  
 City Milwaukee State WI Zip Code 53202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Ast Gn Cn & Ast Sec/Re  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **605.00**

Date of Receipt **10 / 15 / 2014**  
**Transaction ID : 2014101319752-1078**  
 Amount of Each Receipt this Period **35.00**

**C. T. Scott Zach**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6630 Country Creek Ln  
 City Cedar Rapids State IA Zip Code 52403-7023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation General Insurance Agent  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2375.00**

Date of Receipt **10 / 15 / 2014**  
**Transaction ID : 20141017122249-53**  
 Amount of Each Receipt this Period **125.00**

**SUBTOTAL** of Receipts This Page (optional)..... **257.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 79 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Thomas D. Zale**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2818 E Menlo Blvd  
 City Shorewood State WI Zip Code 53211-2652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-788**  
 Amount of Each Receipt this Period  
 50.00

**B. Diana M. Zawada**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N1 W31143 Wildwood T  
 City Delafield State WI Zip Code 53018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation Dir-Enterprise Vendor Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 394.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-766**  
 Amount of Each Receipt this Period  
 22.00

**C. Rick T. Zehner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 203 W Ravine Baye Rd  
 City Bayside State WI Zip Code 53217-1334  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NML Occupation VP Research & Special Projects  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : 2014101319752-970**  
 Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	112.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 80 OF 82  
(check only one)

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

Full Name (Last, First, Middle Initial)  
**A. Todd O. Zinkgraf**

Mailing Address 118 Ferris Dr

City North Prairie State WI Zip Code 53153-9455

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

Name of Employer NML Occupation VP Ent Solutions

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1558.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 2014101319752-999**

Amount of Each Receipt this Period  
82.00

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

Mailing Address 104 Wildwood Dr

City Avon State CT Zip Code 06001-4413

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3952.00

Date of Receipt  
10 / 15 / 2014  
**Transaction ID : 20141017122249-13**

Amount of Each Receipt this Period  
208.00

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	290.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15575.46

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 777 E.Wisconsin Ave.

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement  
Service Charge

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 85432DAB841A3FD4FA4**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Diane Black for Congress**

Mailing Address PO Box 1437

City Gallatin State TN Zip Code 37066-1437

Purpose of Disbursement  
2014 General

011

Candidate Name  
**Diane Black**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TN District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2014

Transaction ID : 0C4EFDD42ADAF94315A

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Sensenbrenner Committee**

Mailing Address PO Box 575

City Brookfield State WI Zip Code 53008

Purpose of Disbursement  
2014 General

011

Candidate Name  
**F. James Sensenbrenner Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 08 / 2014

Transaction ID : 44310097BBD6852341E

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3500.00

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

3500.00