

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

ADDRESS (number and street)

720 E Wisconsin Ave

Check if different
than previously
reported. (ACC)

Milwaukee

WI

53202

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00197095

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

05

D D D /

01

Y Y Y Y Y Y

2024

through

M M M /

05

D D D /

31

Y Y Y Y Y Y

2024

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Raymonds, Adam, , ,

Signature of Treasurer

Raymonds, Adam, , ,

Date

M M M /

06

D D D /

13

Y Y Y Y Y Y

2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)Report Covering the Period: From:

M M	D D	Y Y Y Y Y Y
05	01	2024

 To:

M M	D D	Y Y Y Y Y Y
05	31	2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="6">2024</td></tr></table>	Y	Y	Y	Y	Y	Y	2024							<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td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☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

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Page 3

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Report Covering the Period:

From:

M M / D D / Y Y Y Y
05 01 2024

To:

M M / D D / Y Y Y Y
05 31 2024**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).....

35512.64

156978.40

(ii) Unitemized

3738.66

37898.10

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

39251.30

194876.50

(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)

39251.30

194876.50

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

3500.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

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))

39251.30

198376.50

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

39251.30

198376.50

DETAILED SUMMARY PAGE of Disbursements

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Page 4

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37000.00	252000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	2000.00	48300.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	39000.00	300300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39000.00	300300.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	39251.30	194876.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39251.30	194876.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Abbass, Steven, Fay, ,

Mailing Address 9 Woodhull Ct

City
NorthportState
NYZip Code
11768-2844FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 202405151998-62

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Abbass, Steven, Fay, ,

Mailing Address 9 Woodhull Ct

City
NorthportState
NYZip Code
11768-2844FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119911-63

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Abell, Rick, A, ,

Mailing Address 6025 Princeton Reach Way

City
Granite BayState
CAZip Code
95746-6217FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 202405151998-43

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

541.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Abell, Rick, A, ,

Mailing Address 6025 Princeton Reach Way

City

Granite Bay

State

CA

Zip Code

95746-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-44**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Ryan, , ,

Mailing Address W302N3057 Windrush Cir

City

Pewaukee

State

WI

Zip Code

53072-4278

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Assistant General Counsel

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
05 / 15 / 2024**Transaction ID : 20240515193710-149**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Anderson, Ryan, , ,

Mailing Address W302N3057 Windrush Cir

City

Pewaukee

State

WI

Zip Code

53072-4278

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Assistant General Counsel

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
05 / 31 / 2024**Transaction ID : 2024053119379-168**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Anderson, Thomas, K, ,

Mailing Address 139 E Chowning Cross St

City
MequonState
WIZip Code
53092-6204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Ipas

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-259**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Thomas, K, ,

Mailing Address 139 E Chowning Cross St

City
MequonState
WIZip Code
53092-6204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Ipas

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-283**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Auth, Raymond, J, ,

Mailing Address 912 E Circle Dr

City
Whitefish BayState
WIZip Code
53217-5361FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Investment Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-9**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Auth, Raymond, J, ,

Mailing Address 912 E Circle Dr

City
Whitefish BayState
WIZip Code
53217-5361FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Investment Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-16**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Azam, Ahmed, F, ,

Mailing Address 3490 W Yorkshire Cir

City
FranklinState
WIZip Code
53132-7000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Infrastructure & Cloud SRvc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-74**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Azam, Ahmed, F, ,

Mailing Address 3490 W Yorkshire Cir

City
FranklinState
WIZip Code
53132-7000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Infrastructure & Cloud SRvc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-98**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

249.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barajas, Yvette, M, ,

Mailing Address 112 Magnolia Cir E

City
La VerniaState
TXZip Code
78121-0078FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Business Program Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-64**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barajas, Yvette, M, ,

Mailing Address 112 Magnolia Cir E

City
La VerniaState
TXZip Code
78121-0078FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Business Program Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-90**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Baron, Juan, Sebastian, ,

Mailing Address 3541 Las Flores Canyon Rd

City
MalibuState
CAZip Code
90265-3433FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Plocher Ins Agy IncOccupation (for Individual)
Special Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-73**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Baron, Juan, Sebastian, ,

Mailing Address 3541 Las Flores Canyon Rd

City
MalibuState
CAZip Code
90265-3433FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Plocher Ins Agy IncOccupation (for Individual)
Special Agent

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
05 / 31 / 2024

Transaction ID : 2024053119911-74

Amount of Each Receipt this Period

420.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Beer, Mitchell, C, ,

Mailing Address 3387 Hampton Ct

City
Thousand OaksState
CAZip Code
91362-1130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 202405151998-20

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beer, Mitchell, C, ,

Mailing Address 3387 Hampton Ct

City
Thousand OaksState
CAZip Code
91362-1130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119911-21

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Behling, Christopher, J, ,

Mailing Address 777 North Van Buren

City
MilwaukeeState
WIZip Code
53202-3859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vice President, Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-2**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Behling, Christopher, J, ,

Mailing Address 777 North Van Buren

City
MilwaukeeState
WIZip Code
53202-3859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vice President, Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-81**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beilin, Alex, , ,

Mailing Address 200 Broad St Apt 1238

City
StamfordState
CTZip Code
06901-2067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-38**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Beilin, Alex, , ,

Mailing Address 200 Broad St Apt 1238

City
StamfordState
CTZip Code
06901-2067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-39**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bentley, John, E, ,

Mailing Address 2012 E Glendale Ave

City
Whitefish BayState
WIZip Code
53211-1239FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Head Of Wealth & Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-86**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bentley, John, E, ,

Mailing Address 2012 E Glendale Ave

City
Whitefish BayState
WIZip Code
53211-1239FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Head Of Wealth & Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-112**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Berry, Douglas, S, ,

Mailing Address 350 Oak Stand Ct

City
ChesterfieldState
MOZip Code
63005-1374FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gross Encl Grp LLCOccupation (for Individual)
Special Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-70**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Berry, Douglas, S, ,

Mailing Address 350 Oak Stand Ct

City
ChesterfieldState
MOZip Code
63005-1374FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gross Encl Grp LLCOccupation (for Individual)
Special Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-71**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Black, Dwaan, C, ,

Mailing Address 3520 Dumbarton Rd NW

City
AtlantaState
GAZip Code
30327-2614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-17**

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Black, Dwaan, C, ,

Mailing Address 3520 Dumbarton Rd NW

City
AtlantaState
GAZip Code
30327-2614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119911-18

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Botcher, Sandra, L, ,

Mailing Address 704 Saint Johns Dr

City
DelafieldState
WIZip Code
53018-1502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1610.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-223

Amount of Each Receipt this Period

161.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Botcher, Sandra, L, ,

Mailing Address 704 Saint Johns Dr

City
DelafieldState
WIZip Code
53018-1502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1610.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-241

Amount of Each Receipt this Period

161.00

☐ Memo Item

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

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

447.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brase, Jennifer, , ,

Mailing Address 4303 S 230th Plz

City
ElkhornState
NEZip Code
68022-3434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-60**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brase, Jennifer, , ,

Mailing Address 4303 S 230th Plz

City
ElkhornState
NEZip Code
68022-3434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-61**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Breitzman, Kristofer, D, ,

Mailing Address W290N3649 Tall Tree Ct

City
PewaukeeState
WIZip Code
53072-3152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-288**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Breitzman, Kristofer, D, ,

Mailing Address W290N3649 Tall Tree Ct

City
PewaukeeState
WIZip Code
53072-3152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-73

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brown, Timothy, K, ,

Mailing Address 385 Ironstone Ct

City
CedarburgState
WIZip Code
53012-8000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Director

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
05 / 31 / 2024

Transaction ID : 2024053119379-129

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brummond, Carl, P, ,

Mailing Address 4666 N Woodburn St

City
Whitefish BayState
WIZip Code
53211-1124FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-26

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

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

98.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brummond, Carl, P, ,

Mailing Address 4666 N Woodburn St

City
Whitefish BayState
WIZip Code
53211-1124FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-62

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Byrne, Michael, T, ,

Mailing Address 395 La Casa Via

City
Walnut CreekState
CAZip Code
94598-4842FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 202405151998-15

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Byrne, Michael, T, ,

Mailing Address 395 La Casa Via

City
Walnut CreekState
CAZip Code
94598-4842FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119911-16

Amount of Each Receipt this Period

208.00

☐ Memo Item

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

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

443.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Callanan, Susan, W, ,

Mailing Address 2736 N Shepard Ave

City
MilwaukeeState
WIZip Code
53211-3852FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Public Policy & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-174**

Amount of Each Receipt this Period

84.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Callanan, Susan, W, ,

Mailing Address 2736 N Shepard Ave

City
MilwaukeeState
WIZip Code
53211-3852FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Public Policy & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-193**

Amount of Each Receipt this Period

84.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Castino, John, A, ,

Mailing Address 1111 North Astor Str

City
MilwaukeeState
WIZip Code
53202-3318FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Restaurant And Events

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
05 / 31 / 2024**Transaction ID : 2024053119379-87**

Amount of Each Receipt this Period

21.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

190.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 122
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Castronovo, Greg, , ,

Mailing Address 317 Evening Star Ln

City
BozemanState
MTZip Code
59715-7738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-28**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Castronovo, Greg, , ,

Mailing Address 317 Evening Star Ln

City
BozemanState
MTZip Code
59715-7738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-29**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Christensen, Scott, G, ,

Mailing Address 45 Middle Rd

City
PortsmouthState
NHZip Code
03801-4802FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-26**

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 122
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christensen, Scott, G, ,

Mailing Address 45 Middle Rd

City
PortsmouthState
NHZip Code
03801-4802FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-27**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Craythorne, Michael, J, ,

Mailing Address 1224 Deer Ridge Rd

City
Fruit HeightsState
UTZip Code
84037-3206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TMG Agency LLCOccupation (for Individual)
Special Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-67**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Craythorne, Michael, J, ,

Mailing Address 1224 Deer Ridge Rd

City
Fruit HeightsState
UTZip Code
84037-3206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TMG Agency LLCOccupation (for Individual)
Special Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-68**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

159.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crosby, Grady, L, ,

Mailing Address 1325 N Van Buren ST

City
MilwaukeeState
WIZip Code
53202-2600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp, Chief Sustainability, And

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-66**

Amount of Each Receipt this Period

41.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crosby, Grady, L, ,

Mailing Address 1325 N Van Buren ST

City
MilwaukeeState
WIZip Code
53202-2600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp, Chief Sustainability, And

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-92**

Amount of Each Receipt this Period

41.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cruse, Tait, , ,

Mailing Address 2961 Belclaire Dr

City
FriscoState
TXZip Code
75034-5969FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-19**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

291.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cruse, Tait, , ,

Mailing Address 2961 Belclaire Dr

City
FriscoState
TXZip Code
75034-5969FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-20**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Culler, Kelly, I, ,

Mailing Address 2841 Parkers Landing Rd

City

Mount Pleasant

State
SCZip Code
29466-6743FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Talent Acq & SR Hr Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-50**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Culler, Kelly, I, ,

Mailing Address 2841 Parkers Landing Rd

City

Mount Pleasant

State
SCZip Code
29466-6743FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Talent Acq & SR Hr Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-43**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 122
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cunningham, Brian, R, ,

Mailing Address 6251 S Billings Way

City
CentennialState
COZip Code
80111-6009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-14**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cunningham, Brian, R, ,

Mailing Address 6251 S Billings Way

City
CentennialState
COZip Code
80111-6009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-15**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dierks, Joe, , ,

Mailing Address 1970 Riley St

City
HudsonvilleState
MIZip Code
49426-7665FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-56**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

458.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dierks, Joe, , ,

Mailing Address 1970 Riley St

City
HudsonvilleState
MIZip Code
49426-7665FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-57**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dinger, Derrick, D, ,

Mailing Address 3195 49th St South

City
FargoState
NDZip Code
58104-4542FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-64**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dinger, Derrick, D, ,

Mailing Address 3195 49th St South

City
FargoState
NDZip Code
58104-4542FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

503.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-65**

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Doolittle, Michael, C, ,

Mailing Address 4586 Cascades Dr

City
ManliusState
NYZip Code
13104-2369FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
R P Dodd Group IncOccupation (for Individual)
Special Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-3**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Doolittle, Michael, C, ,

Mailing Address 4586 Cascades Dr

City
ManliusState
NYZip Code
13104-2369FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
R P Dodd Group IncOccupation (for Individual)
Special Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-3**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dorsey, Michael, J, ,

Mailing Address 4357 N Alpine Ave

City
ShorewoodState
WIZip Code
53211-1412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Director

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
05 / 31 / 2024**Transaction ID : 2024053119379-10**

Amount of Each Receipt this Period

21.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dunn, John, E, ,

Mailing Address 4656 N Wilshire Rd

City
Whitefish BayState
WIZip Code
53211-1260FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Ipas Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-196**

Amount of Each Receipt this Period

81.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dunn, John, E, ,

Mailing Address 4656 N Wilshire Rd

City
Whitefish BayState
WIZip Code
53211-1260FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Ipas Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-211**

Amount of Each Receipt this Period

81.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Eisold, Christopher, M, ,

Mailing Address W154S7609 Rain Tree Ct

City
MuskegoState
WIZip Code
53150-7761FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-96**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

212.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Eisold, Christopher, M, ,

Mailing Address W154S7609 Rain Tree Ct

City
MuskegoState
WIZip Code
53150-7761FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-127**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ekeroth, Eric, J, ,

Mailing Address 19672 Stanford Hall Pl

City
AshburnState
VAZip Code
20147-5223FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-206**

Amount of Each Receipt this Period

36.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ekeroth, Eric, J, ,

Mailing Address 19672 Stanford Hall Pl

City
AshburnState
VAZip Code
20147-5223FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-226**

Amount of Each Receipt this Period

36.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

122.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ertz, John, C, ,

Mailing Address 18235 Shaker Blvd

City
Shaker HtsState
OHZip Code
44120-1754FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-10**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ertz, John, C, ,

Mailing Address 18235 Shaker Blvd

City
Shaker HtsState
OHZip Code
44120-1754FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-11**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Eull, Bradley, L, ,

Mailing Address 2363 N 81st St

City
WauwatosaState
WIZip Code
53213-1001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec / Ipas

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-158**

Amount of Each Receipt this Period

48.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

464.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Eull, Bradley, L, ,

Mailing Address 2363 N 81st St

City
WauwatosaState
WIZip Code
53213-1001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec / Ipas

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-184**

Amount of Each Receipt this Period

480.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fleisner, Corey, R, ,

Mailing Address 4740 Waterstone Ct

City
AppletonState
WIZip Code
54914-8571FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1416.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-52**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fleisner, Corey, R, ,

Mailing Address 4740 Waterstone Ct

City
AppletonState
WIZip Code
54914-8571FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1416.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-53**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

464.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fradin, Gerald, E, ,

Mailing Address 296 Ridgeway Ln

City
LibertyvilleState
ILZip Code
60048-2458FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Chief Fraud Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-221**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fradin, Gerald, E, ,

Mailing Address 296 Ridgeway Ln

City
LibertyvilleState
ILZip Code
60048-2458FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Chief Fraud Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-246**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Franczyk, Lance, P, ,Mailing Address 111 W 5th St
Apt 1002City
TulsaState
OKZip Code
74103-4270FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-29**

Amount of Each Receipt this Period

208.00

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

308.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Franczyk, Lance, P, ,Mailing Address 111 W 5th St
Apt 1002City
TulsaState
OKZip Code
74103-4270FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-30**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gahan, Christopher, T, ,

Mailing Address 4417 Elmwood Dr

City

Alexandria

State

VA

Zip Code

22310-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Vp Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

962.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-35**

Amount of Each Receipt this Period

96.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gahan, Christopher, T, ,

Mailing Address 4417 Elmwood Dr

City

Alexandria

State

VA

Zip Code

22310-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Vp Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

962.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-77**

Amount of Each Receipt this Period

96.25

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

400.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gerend, Timothy, J.,

Mailing Address 511 E Monrovia Ave

City
Whitefish BayState
WIZip Code
53217-4651FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Evp & Chief Distribution Offic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-89**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gerend, Timothy, J.,

Mailing Address 511 E Monrovia Ave

City
Whitefish BayState
WIZip Code
53217-4651FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Evp & Chief Distribution Offic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-115**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gillman, Gregory, M.,

Mailing Address 1862 River Lakes Rd S

City
OconomowocState
WIZip Code
53066-4858FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Financial Plng & Analys

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-107**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

441.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gillman, Gregory, M, ,

Mailing Address 1862 River Lakes Rd S

City
OconomowocState
WIZip Code
53066-4858FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Financial Plng & Analys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-124**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goes, Thomas, J, ,

Mailing Address 1526 Harston Ave

City
OrlandoState
FLZip Code
32814-6700FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-50**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goes, Thomas, J, ,

Mailing Address 1526 Harston Ave

City
OrlandoState
FLZip Code
32814-6700FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-51**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

441.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gokhale, Aditi, J, ,

Mailing Address 122 W Devon St

City
MilwaukeeState
WIZip Code
53217-4338FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ev & Chief Strategy Officer,

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1872.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-24**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gordon, Ian, Maxwell, ,

Mailing Address 354 Fishermans Way

City
JupiterState
FLZip Code
33477-5084FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Striano Fncl Grp LLCOccupation (for Individual)
District Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-2**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gordon, Ian, Maxwell, ,

Mailing Address 354 Fishermans Way

City
JupiterState
FLZip Code
33477-5084FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Striano Fncl Grp LLCOccupation (for Individual)
District Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-2**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

292.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goris, Tom, , , JR

Mailing Address 4735 Wellington Dr

City
Long GroveState
ILZip Code
60047-5223FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-16**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goris, Tom, , , JR

Mailing Address 4735 Wellington Dr

City
Long GroveState
ILZip Code
60047-5223FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-17**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grabau Keele, Calvin, , ,

Mailing Address 2890 NW 86th Pl

City
AnkenyState
IAZip Code
50023-9289FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-74**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

466.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Grabau Keele, Kalvin, , ,

Mailing Address 2890 NW 86th Pl

City
AnkenyState
IAZip Code
50023-9289FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-75**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Grabner, Todd, Matthew, ,

Mailing Address 3086 E Silver Hawk Dr

City
HolladayState
UTZip Code
84121-1572FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-66**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grabner, Todd, Matthew, ,

Mailing Address 3086 E Silver Hawk Dr

City
HolladayState
UTZip Code
84121-1572FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-67**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

466.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gross, Stephen, , ,

Mailing Address 6 Twin Springs Ln

City
Saint LouisState
MOZip Code
63124-1139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-30**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gross, Stephen, , ,

Mailing Address 6 Twin Springs Ln

City
Saint LouisState
MOZip Code
63124-1139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-31**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Guinan, Stephen, T, ,

Mailing Address 126 Waverly Cir

City
PhoenixvilleState
PAZip Code
19460-2500FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-25**

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

541.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Guinan, Stephen, T, ,

Mailing Address 126 Waverly Cir

City
PhoenixvilleState
PAZip Code
19460-2500FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-26**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Habetz, Avril, P, ,

Mailing Address 73 Woodlake Blvd

City
KennerState
LAZip Code
70065-1053FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NMFN Of Louisiana LLCOccupation (for Individual)
District Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-4**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Habetz, Avril, P, ,

Mailing Address 73 Woodlake Blvd

City
KennerState
LAZip Code
70065-1053FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NMFN Of Louisiana LLCOccupation (for Individual)
District Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-4**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Handal, Jason, R, ,

Mailing Address 311 W White Oak Way

City
MequonState
WIZip Code
53092-6248FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vice President Risk Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-301**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Handal, Jason, R, ,

Mailing Address 311 W White Oak Way

City
MequonState
WIZip Code
53092-6248FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vice President Risk Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-71**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanneman, Amy, , ,

Mailing Address 1400 E Fox Ln

City
Fox PointState
WIZip Code
53217-2851FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Diversity & Inclusion

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-279**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

249.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanneman, Amy, , ,

Mailing Address 1400 E Fox Ln

City
Fox PointState
WIZip Code
53217-2851FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Diversity & Inclusion

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-299

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, Paul, L, ,

Mailing Address 1310 S Hodges St

City
Spokane ValleyState
WAZip Code
99016-5299FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 15 / 2024

Transaction ID : 202405151998-27

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanson, Paul, J, ,

Mailing Address 4041 N Oakland Ave

City
ShorewoodState
WIZip Code
53211-2360FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-222

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanson, Paul, L, ,

Mailing Address 1310 S Hodges St

City
Spokane ValleyState
WAZip Code
99016-5299FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 31 / 2024

Transaction ID : 2024053119911-28

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, Paul, J, ,

Mailing Address 4041 N Oakland Ave

City
ShorewoodState
WIZip Code
53211-2360FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-239

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hawkins, Marcus, , ,

Mailing Address 75 West End Ave

City
New YorkState
NYZip Code
10023-7853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Digital Workplace

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-46

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

132.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hawkins, Marcus, , ,

Mailing Address 75 West End Ave

City
New YorkState
NYZip Code
10023-7853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Digital Workplace

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-6

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heinemann, Ryan, W, ,

Mailing Address 3508 N Shepard Ave

City
ShorewoodState
WIZip Code
53211-2658FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-246

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heinemann, Ryan, W, ,

Mailing Address 3508 N Shepard Ave

City
ShorewoodState
WIZip Code
53211-2658FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-265

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

216.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hellyer, Brandon, J, ,

Mailing Address 11839 58th St N

City
Lake ElmoState
MNZip Code
55042-6106FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-42**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hellyer, Brandon, J, ,

Mailing Address 11839 58th St N

City
Lake ElmoState
MNZip Code
55042-6106FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-43**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hempstead, Gerard, M, ,

Mailing Address 49 W Walling Dr

City
Creve CoeurState
MOZip Code
63141-7371FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-41**

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

541.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hempstead, Gerard, M, ,

Mailing Address 49 W Walling Dr

City
Creve CoeurState
MOZip Code
63141-7371FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-42**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heurung, Mark, J, ,

Mailing Address 3315 Graham Hill Rd

City
OronoState
MNZip Code
55356-5501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-24**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heurung, Mark, J, ,

Mailing Address 3315 Graham Hill Rd

City
OronoState
MNZip Code
55356-5501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-25**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

541.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Holleran, Matthew, , ,

Mailing Address 47 Ketch Rd

City
MorristownState
NJZip Code
07960-2660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-5**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Holleran, Matthew, , ,

Mailing Address 47 Ketch Rd

City
MorristownState
NJZip Code
07960-2660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-6**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Holter, Steve, H, ,

Mailing Address 1626 Lake Shore Dr

City
Lake GenevaState
WIZip Code
53147-9706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-32**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

458.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Holter, Steve, H, ,

Mailing Address 1626 Lake Shore Dr

City
Lake GenevaState
WIZip Code
53147-9706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-33**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hughes, Kara, , ,

Mailing Address 3581 S Spruce St

City
DenverState
COZip Code
80237-1356FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp SR Hr Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-263**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hughes, Kara, , ,

Mailing Address 3581 S Spruce St

City
DenverState
COZip Code
80237-1356FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp SR Hr Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-289**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Iodice, Scott, , ,

Mailing Address 1930 Old Court Rd

City
RuxtonState
MDZip Code
21204-1849FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-12**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iodice, Scott, , ,

Mailing Address 1930 Old Court Rd

City
RuxtonState
MDZip Code
21204-1849FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-13**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jones, Todd, M, ,

Mailing Address W252N4956 Aberdeen Dr

City
PewaukeeState
WIZip Code
53072-1351FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Evp & Chief Financial Officer

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
05 / 15 / 2024**Transaction ID : 20240515193710-79**

Amount of Each Receipt this Period

104.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

520.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jones, Todd, M.,

Mailing Address W252N4956 Aberdeen Dr

City
PewaukeeState
WIZip Code
53072-1351FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ev & Chief Financial Officer

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
05 / 31 / 2024**Transaction ID : 2024053119379-101**

Amount of Each Receipt this Period

104.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Julka, Daniel, , ,

Mailing Address 8221 W Woodfield Dr

City
FranklinState
WIZip Code
53132-8788FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Securities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-139**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Julka, Daniel, , ,

Mailing Address 8221 W Woodfield Dr

City
FranklinState
WIZip Code
53132-8788FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Securities

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-162**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

270.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kaveney, Kevin, Francis, ,

Mailing Address 14 Northgate Rd

City
Colorado SpgsState
COZip Code
80906-4332FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-59**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kaveney, Kevin, Francis, ,

Mailing Address 14 Northgate Rd

City
Colorado SpgsState
COZip Code
80906-4332FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-60**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelley, Shawn, F, ,

Mailing Address 7812 Remington Rd

City
MontgomeryState
OHZip Code
45242-7130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-47**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kelley, Shawn, F, ,

Mailing Address 7812 Remington Rd

City
MontgomeryState
OHZip Code
45242-7130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-48**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kemelgor, Troy, B, ,

Mailing Address 7495 Bridlespur Ln

City
DelawareState
OHZip Code
43015-8613FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-44**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kemelgor, Troy, B, ,

Mailing Address 7495 Bridlespur Ln

City
DelawareState
OHZip Code
43015-8613FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-45**

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

458.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kiecker, David, Daniel, ,

Mailing Address 11696 Approach Blvd

City
FishersState
INZip Code
46037-4146FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-55**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kiecker, David, Daniel, ,

Mailing Address 11696 Approach Blvd

City
FishersState
INZip Code
46037-4146FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-56**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Klawonn, Jason, T, ,

Mailing Address 1242 40th Ave

City
KenoshaState
WIZip Code
53144-2900FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Vp & Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-156**

Amount of Each Receipt this Period

85.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

501.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Klawonn, Jason, T, ,

Mailing Address 1242 40th Ave

City
KenoshaState
WIZip Code
53144-2900FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-172**

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kolawole, Abimbola, O, ,

Mailing Address 4801 N Woodburn St

City
Whitefish BayState
WIZip Code
53217-6064FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Chief Audit Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-155**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kolawole, Abimbola, O, ,

Mailing Address 4801 N Woodburn St

City
Whitefish BayState
WIZip Code
53217-6064FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Chief Audit Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-189**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

251.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Konopa, Kevin, J, ,

Mailing Address 2331 N 90th St

City
WauwatosaState
WIZip Code
53226-1828FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Field Experience Alignment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-255**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Konopa, Kevin, J, ,

Mailing Address 2331 N 90th St

City
WauwatosaState
WIZip Code
53226-1828FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Field Experience Alignment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-277**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kramer, Ryan, , ,

Mailing Address 665 S Euclid Ave

City
ElmhurstState
ILZip Code
60126-4337FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-49**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kramer, Ryan, , ,

Mailing Address 665 S Euclid Ave

City
ElmhurstState
ILZip Code
60126-4337FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-50**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kropp, Rosanne, L, ,

Mailing Address 777 N Van Buren St

City
MilwaukeeState
WIZip Code
53202-3859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Public Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-36**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kropp, Rosanne, L, ,

Mailing Address 777 N Van Buren St

City
MilwaukeeState
WIZip Code
53202-3859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Public Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-76**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laszewski, Todd, L, ,

Mailing Address 2604 N 90th St

City
WauwatosaState
WIZip Code
53226-1813FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Actuary Vp

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
05 / 31 / 2024**Transaction ID : 2024053119379-175**

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lawhon, M, Kevin, ,Mailing Address 2430 Vanderbilt Beach Rd
Ste 108City
NaplesState
FLZip Code
34109-2654FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-37**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lawhon, M, Kevin, ,Mailing Address 2430 Vanderbilt Beach Rd
Ste 108City
NaplesState
FLZip Code
34109-2654FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-38**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

437.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lecher, Nichole, , ,

Mailing Address 11822 N Woodside Ct

City
MequonState
WIZip Code
53092-2950FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Client Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-164**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lecher, Nichole, , ,

Mailing Address 11822 N Woodside Ct

City
MequonState
WIZip Code
53092-2950FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Client Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-182**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Luce, Jason, , ,

Mailing Address 2551 Highview Ter

City
Fort WorthState
TXZip Code
76109-1037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cruse Fncl Group IncOccupation (for Individual)
District Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-72**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Luce, Jason, , ,

Mailing Address 2551 Highview Ter

City
Fort WorthState
TXZip Code
76109-1037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cruse Fnd Group IncOccupation (for Individual)
District Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-73**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Luckow, Erika, K, ,

Mailing Address W124N11385 Wasauke Rd

City
GermantownState
WIZip Code
53022-3600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Talent & Leadership Dev

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
05 / 31 / 2024**Transaction ID : 2024053119379-63**

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lueken, Jeffrey, J, ,

Mailing Address 1213 E Goodrich Ln

City
Fox PointState
WIZip Code
53217-2946FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-204**

Amount of Each Receipt this Period

168.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 59 OF 122
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lueken, Jeffrey, J, ,

Mailing Address 1213 E Goodrich Ln

City
Fox PointState
WIZip Code
53217-2946FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-201**

Amount of Each Receipt this Period

168.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lyons, Stephanie, A, ,

Mailing Address 809 E Sylvan Ave

City
Whitefish BayState
WIZip Code
53217-5353FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Treasury, Investment Risk &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

970.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-226**

Amount of Each Receipt this Period

97.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lyons, Stephanie, A, ,

Mailing Address 809 E Sylvan Ave

City
Whitefish BayState
WIZip Code
53217-5353FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Treasury, Investment Risk &

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

970.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-249**

Amount of Each Receipt this Period

97.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

362.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Makinen, Lori, J, ,

Mailing Address 27417 N Lake Dr

City
WaterfordState
WIZip Code
53185-1346FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Product Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-224**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Makinen, Lori, J, ,

Mailing Address 27417 N Lake Dr

City
WaterfordState
WIZip Code
53185-1346FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Product Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-225**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Makinen, Lori, J, ,

Mailing Address 27417 N Lake Dr

City
WaterfordState
WIZip Code
53185-1346FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Product Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-247**

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Makinen, Lori, J., ,

Mailing Address 27417 N Lake Dr

City
WaterfordState
WIZip Code
53185-1346FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Product Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-248**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mandacina, Joseph, M., ,

Mailing Address 777 N Van Buren Stre

City
MilwaukeeState
WIZip Code
53202-3859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Chief Communications Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-37**

Amount of Each Receipt this Period

33.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mandacina, Joseph, M., ,

Mailing Address 777 N Van Buren Stre

City
MilwaukeeState
WIZip Code
53202-3859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Chief Communications Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-84**

Amount of Each Receipt this Period

33.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 62 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Manista, Raymond, J, ,

Mailing Address 106 W Seeboth Street

City
MilwaukeeState
WIZip Code
53204-4322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Evp & Chief Legal/Compliance O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-261**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Manista, Raymond, J, ,

Mailing Address 106 W Seeboth Street

City
MilwaukeeState
WIZip Code
53204-4322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Evp & Chief Legal/Compliance O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-285**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McClure, Brian, W, ,

Mailing Address 1402 Wyndemere Point Dr

City
ChampaignState
ILZip Code
61822-3349FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-51**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

458.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 63 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McClure, Brian, W, ,

Mailing Address 1402 Wyndemere Point Dr

City
ChampaignState
ILZip Code
61822-3349FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-52**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McCourt, Cheri, L, ,

Mailing Address 16150 Wildwood Ct

City
BrookfieldState
WIZip Code
53005-3568FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-141**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McCourt, Cheri, L, ,

Mailing Address 16150 Wildwood Ct

City
BrookfieldState
WIZip Code
53005-3568FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-164**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 64 OF 122
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McLean, Andrew, J, ,

Mailing Address 1509 N Jefferson St

City
MilwaukeeState
WIZip Code
53202-2071FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-176**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McLean, Andrew, J, ,

Mailing Address 1509 N Jefferson St

City
MilwaukeeState
WIZip Code
53202-2071FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-219**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McQuade, Corey, D, ,

Mailing Address 190 S Berkley Ave

City
ElmhurstState
ILZip Code
60126-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-58**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McQuade, Corey, D, ,

Mailing Address 190 S Berkley Ave

City
ElmhurstState
ILZip Code
60126-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119911-59

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meehan, Daniel, J, ,

Mailing Address N30W6890 Lincoln Blvd

City
CedarburgState
WIZip Code
53012-2266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-249

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meehan, Daniel, J, ,

Mailing Address N30W6890 Lincoln Blvd

City
CedarburgState
WIZip Code
53012-2266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-250

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

287.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meehan, Daniel, J, ,

Mailing Address N30W6890 Lincoln Blvd

City
CedarburgState
WIZip Code
53012-2266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-278**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meehan, Daniel, J, ,

Mailing Address N30W6890 Lincoln Blvd

City
CedarburgState
WIZip Code
53012-2266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-279**

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meeks, Jim, Edward, , JR

Mailing Address 264 Cloister Green Ln

City
MemphisState
TNZip Code
38120-2357FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-11**

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

204.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 67 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meeks, Jim, Edward, , JR

Mailing Address 264 Cloister Green Ln

City
MemphisState
TNZip Code
38120-2357FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-12**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mees, Arthur, J, ,

Mailing Address 5347 N Hollywood Ave

City
Whitefish BayState
WIZip Code
53217-5324FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Regional Distrib Perf

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

966.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-203**

Amount of Each Receipt this Period

96.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mees, Arthur, J, ,

Mailing Address 5347 N Hollywood Ave

City
Whitefish BayState
WIZip Code
53217-5324FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Regional Distrib Perf

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

966.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-200**

Amount of Each Receipt this Period

96.67

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

318.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 68 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Michaels, Katherine, E, ,

Mailing Address 9127 Whistling Swan Ln

City
ManliusState
NYZip Code
13104-9670FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
R P Dodd Group IncOccupation (for Individual)
District Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-6**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Michaels, Katherine, E, ,

Mailing Address 9127 Whistling Swan Ln

City
ManliusState
NYZip Code
13104-9670FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
R P Dodd Group IncOccupation (for Individual)
District Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-7**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Aaron, , ,Mailing Address 82 Worcester St
Apt 1City
BostonState
MAZip Code
02118-3903FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-68**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Aaron, , ,Mailing Address 82 Worcester St
Apt 1City
BostonState
MAZip Code
02118-3903FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-69**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Kevin, E, ,

Mailing Address 214 Schenley Rd

City
PittsburghState
PAZip Code
15217-1171FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-23**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Kevin, E, ,

Mailing Address 214 Schenley Rd

City
PittsburghState
PAZip Code
15217-1171FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-24**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

624.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mirabella, Dominic, , ,

Mailing Address 2602 Benjamin Ave

City
Royal OakState
MIZip Code
48073-3085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Seitzinger Fncl Gp IncOccupation (for Individual)
Special Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-9**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mirabella, Dominic, , ,

Mailing Address 2602 Benjamin Ave

City
Royal OakState
MIZip Code
48073-3085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Seitzinger Fncl Gp IncOccupation (for Individual)
Special Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-10**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mitchell, Christian, , ,

Mailing Address 640 E Carlisle Ave

City
Whitefish BayState
WIZip Code
53217-4832FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Evp & Chief Customer Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-124**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

458.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mitchell, Christian, , ,

Mailing Address 640 E Carlisle Ave

City
Whitefish BayState
WIZip Code
53217-4832FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ev & Chief Customer Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-143

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Molloy, Karen, A, ,

Mailing Address 2004 N 85th St

City
WauwatosaState
WIZip Code
53226-2846FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Treasurer

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
05 / 15 / 2024

Transaction ID : 20240515193710-144

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Molloy, Karen, A, ,

Mailing Address 2004 N 85th St

City
WauwatosaState
WIZip Code
53226-2846FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Treasurer

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
05 / 31 / 2024

Transaction ID : 2024053119379-174

Amount of Each Receipt this Period

70.00

☐ Memo Item

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

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

348.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morris, Loren, , ,

Mailing Address 418 N. 3rd Street, U

City
MilwaukeeState
WIZip Code
53203-3012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Advisor Practices

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-47**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morris, Loren, , ,

Mailing Address 418 N. 3rd Street, U

City
MilwaukeeState
WIZip Code
53203-3012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Advisor Practices

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-30**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morris, Scott, J, ,

Mailing Address 4406 N Madero Dr

City
MequonState
WIZip Code
53092FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec -Tax/Hr

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
05 / 31 / 2024**Transaction ID : 2024053119379-221**

Amount of Each Receipt this Period

21.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

187.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nadolski, Mark, A, ,

Mailing Address W150N7040 Country Ln

City
Menomonee FIsState
WIZip Code
53051-5051FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Asst Dir Financial & Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-119

Amount of Each Receipt this Period

22.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Nadolski, Mark, A, ,

Mailing Address W150N7040 Country Ln

City
Menomonee FIsState
WIZip Code
53051-5051FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Asst Dir Financial & Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-148

Amount of Each Receipt this Period

22.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Newman, Jeremy, D, ,

Mailing Address 1140 Lone Tree Rd

City
Elm GroveState
WIZip Code
53122-2019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Field Rewards And Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-165

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119.72

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Newman, Jeremy, D, ,

Mailing Address 1140 Lone Tree Rd

City
Elm GroveState
WIZip Code
53122-2019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Field Rewards And Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-192**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Noll, Sherry, L, ,

Mailing Address 8329 Gittings Rd

City
Mount PleasantState
WIZip Code
53406-2113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Insurable Risk Mgmt

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
05 / 31 / 2024**Transaction ID : 2024053119379-156**

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O Connell, Kevin, , ,

Mailing Address 4807 W Woodmere Rd

City
TampaState
FLZip Code
33609-3632FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-65**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

304.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O Connell, Kevin, , ,

Mailing Address 4807 W Woodmere Rd

City
TampaState
FLZip Code
33609-3632FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-66**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Otto, Timothy, A, ,

Mailing Address 14255 Tulane St

City
BrookfieldState
WIZip Code
53005-4170FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Ins

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Otto, Timothy, A, ,

Mailing Address 14255 Tulane St

City
BrookfieldState
WIZip Code
53005-4170FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Ins

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-5**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Patel, Raj, , ,

Mailing Address 2513 Highland Dr

City
PalatineState
ILZip Code
60067-7363FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Workforce Experience And &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-193**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Patel, Raj, , ,

Mailing Address 2513 Highland Dr

City
PalatineState
ILZip Code
60067-7363FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Workforce Experience And &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-235**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pierz, Michele, E, ,

Mailing Address 9719 N Lamplighter Ln

City
MequonState
WIZip Code
53092-5322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Business Ops Strategy &

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-218**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

196.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 77 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pierz, Michele, E, ,

Mailing Address 9719 N Lamplighter Ln

City
MequonState
WIZip Code
53092-5322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Business Ops Strategy &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-234**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pizzuti, Dante, P, ,

Mailing Address 74 Fairway Rdg

City
AvonState
CTZip Code
06001-2263FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-36**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pizzuti, Dante, P, ,

Mailing Address 74 Fairway Rdg

City
AvonState
CTZip Code
06001-2263FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-37**

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

280.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pleva, Brian, J, ,

Mailing Address 4022 W Stonebridge Ct

City
MilwaukeeState
WIZip Code
53221-5749FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir State Relations

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
05 / 15 / 2024**Transaction ID : 20240515193710-227**

Amount of Each Receipt this Period

32.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pleva, Brian, J, ,

Mailing Address 4022 W Stonebridge Ct

City
MilwaukeeState
WIZip Code
53221-5749FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir State Relations

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
05 / 31 / 2024**Transaction ID : 2024053119379-263**

Amount of Each Receipt this Period

32.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pruett, Charles, R, ,

Mailing Address 8530 Saundersville Rd

City
Mount JulietState
TNZip Code
37122-5094FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-33**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

272.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pruet, Charles, R, ,

Mailing Address 8530 Saundersville Rd

City
Mount JulietState
TNZip Code
37122-5094FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-34**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Radke, Steven, M, ,

Mailing Address 777 N Prospect Ave.

City
MilwaukeeState
WIZip Code
53202-4000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Government & Community Rela

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-274**

Amount of Each Receipt this Period

108.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Radke, Steven, M, ,

Mailing Address 777 N Prospect Ave.

City
MilwaukeeState
WIZip Code
53202-4000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Government & Community Rela

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-57**

Amount of Each Receipt this Period

108.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

424.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reeter, Jeff, D, ,

Mailing Address 7 Williamsburg Ln

City
HoustonState
TXZip Code
77024-5144FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-48**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reeter, Jeff, D, ,

Mailing Address 7 Williamsburg Ln

City
HoustonState
TXZip Code
77024-5144FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-49**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rhoades, Adam, T, ,

Mailing Address 2038 Rosemont Pl

City
VestaviaState
ALZip Code
35243-1767FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-39**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

624.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rhoades, Adam, T, ,

Mailing Address 2038 Rosemont Pl

City
VestaviaState
ALZip Code
35243-1767FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-40**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Richardson, Peter, K, ,

Mailing Address 6960 N Barnett Ln

City
Fox PointState
WIZip Code
53217-3603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Planning Excellence

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-131**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Richardson, Peter, K, ,

Mailing Address 6960 N Barnett Ln

City
Fox PointState
WIZip Code
53217-3603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Planning Excellence

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-130**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

268.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Richardson, Wesley, H, ,

Mailing Address 1 Open Gate Whitaker Hil

City
HuntingtonState
WVZip Code
25701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-69**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Richardson, Wesley, H, ,

Mailing Address 1 Open Gate Whitaker Hil

City
HuntingtonState
WVZip Code
25701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-70**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rivers, J, Daniel, ,

Mailing Address 3601 River Ridge Cv

City
ProspectState
KYZip Code
40059-8038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-13**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

541.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rivers, J, Daniel, ,

Mailing Address 3601 River Ridge Cv

City
ProspectState
KYZip Code
40059-8038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-14**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roberts, John, C, ,

Mailing Address 2743 N Lake Dr

City
MilwaukeeState
WIZip Code
53211-3851FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Field Talent & Performance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

904.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-212**

Amount of Each Receipt this Period

90.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Roberts, John, C, ,

Mailing Address 2743 N Lake Dr

City
MilwaukeeState
WIZip Code
53211-3851FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Field Talent & Performance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

904.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-230**

Amount of Each Receipt this Period

90.42

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

388.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Robertson, Don, J, ,

Mailing Address 1046 E Thorne Ln

City
Fox PointState
WIZip Code
53217-3646FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Evp & Chief Hr Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-280**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Robertson, Don, J, ,

Mailing Address 1046 E Thorne Ln

City
Fox PointState
WIZip Code
53217-3646FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Evp & Chief Hr Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-20**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Robinson, Ramon, L, ,

Mailing Address 2230 N Swan Blvd

City
WauwatosaState
WIZip Code
53226-2646FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Investment Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

346.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-272**

Amount of Each Receipt this Period

34.62

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Robinson, Ramon, L, ,

Mailing Address 2230 N Swan Blvd

City
WauwatosaState
WIZip Code
53226-2646FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Investment Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-55**

Amount of Each Receipt this Period

34.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ruhl, John, H, ,

Mailing Address 10 Skyfield Dr

City
PrincetonState
NJZip Code
08540-7403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-54**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ruhl, John, H, ,

Mailing Address 10 Skyfield Dr

City
PrincetonState
NJZip Code
08540-7403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-55**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Russo, Matt, , ,

Mailing Address 139 Deep Valley Rd

City
New CanaanState
CTZip Code
06840-2804FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-40**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Russo, Matt, , ,

Mailing Address 139 Deep Valley Rd

City
New CanaanState
CTZip Code
06840-2804FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-41**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Salazar, Jessica, M, ,

Mailing Address 6110 Saint Andrews Ct

City
Ponte VedraState
FLZip Code
32082-2002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-71**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

458.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 87 OF 122
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Salazar, Jessica, M, ,

Mailing Address 6110 Saint Andrews Ct

City
Ponte VedraState
FLZip Code
32082-2002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-72**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Santillo, Antonio, M, ,

Mailing Address 5519 N Lake Dr

City
MilwaukeeState
WIZip Code
53217-5219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Planning, Partnerships, And

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-62**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Santillo, Antonio, M, ,

Mailing Address 5519 N Lake Dr

City
MilwaukeeState
WIZip Code
53217-5219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Planning, Partnerships, And

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-14**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sarnecki, R, Philip, ,

Mailing Address 18240 Melrose Dr

City
BucyrusState
KSZip Code
66013-9081FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-21**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sarnecki, R, Philip, ,

Mailing Address 18240 Melrose Dr

City
BucyrusState
KSZip Code
66013-9081FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-22**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schattschneider, Cal, D, ,

Mailing Address 5940 Stefanie Way

City
CaledoniaState
WIZip Code
53108-9563FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

NML

Occupation (for Individual)

Vp Campus And Event Experience

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-293**

Amount of Each Receipt this Period

60.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

260.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schattschneider, Cal, D, ,

Mailing Address 5940 Stefanie Way

City
CaledoniaState
WIZip Code
53108-9563FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Campus And Event Experience

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-50**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schedler, Craig, L, ,

Mailing Address 11221 Synergy Drive

City
WauwatosaState
WIZip Code
53222-1353FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Strategic Investing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-244**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schedler, Craig, L, ,

Mailing Address 11221 Synergy Drive

City
WauwatosaState
WIZip Code
53222-1353FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Strategic Investing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-268**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

226.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schenkel, Christopher, J, ,

Mailing Address 27085 Saddlerock Pl

City
HarrisburgState
SDZip Code
57032-8243FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-61**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schenkel, Christopher, J, ,

Mailing Address 27085 Saddlerock Pl

City
HarrisburgState
SDZip Code
57032-8243FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-62**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schlifske, John, E, ,

Mailing Address 1500 Greenway Ter

City
Elm GroveState
WIZip Code
53122-1611FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NMLOccupation (for Individual)
Chairman President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-43**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

458.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schlifske, John, E, ,

Mailing Address 1500 Greenway Ter

City
Elm GroveState
WIZip Code
53122-1611FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Chairman President & Ceo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-59**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schneider, Rodd, , ,Mailing Address 1415 E Fairy Chasm Rd
RCity
BaysideState
WIZip Code
53217-1433FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Litig & Distrib Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-161**

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schneider, Rodd, , ,Mailing Address 1415 E Fairy Chasm Rd
RCity
BaysideState
WIZip Code
53217-1433FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Litig & Distrib Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-177**

Amount of Each Receipt this Period

85.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

378.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schneider, Sarah, R, ,

Mailing Address 4380 N Wildwood Ave

City
ShorewoodState
WIZip Code
53211-1436FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Distrib SRvcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-83**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schultz, Deborah, A, ,

Mailing Address 1219 S Waterville La

City
OconomowocState
WIZip Code
53066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-147**

Amount of Each Receipt this Period

95.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schultz, Deborah, A, ,

Mailing Address 1219 S Waterville La

City
OconomowocState
WIZip Code
53066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp & Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

954.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-178**

Amount of Each Receipt this Period

95.40

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

273.80

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schutte, Brent, G, ,

Mailing Address N39W23709

City
PewaukeeState
WIZip Code
53072FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Wmc Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-234**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schutte, Brent, G, ,

Mailing Address N39W23709

City
PewaukeeState
WIZip Code
53072FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Wmc Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-261**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Seiden, Adam, D, ,

Mailing Address 600 Hollow Tree Ridge Rd

City
DarienState
CTZip Code
06820-2420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-53**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 94 OF 122
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seiden, Adam, D, ,

Mailing Address 600 Hollow Tree Ridge Rd

City
DarienState
CTZip Code
06820-2420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-54**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sieb, Charles, , ,

Mailing Address 2677 Rolling View Rd

City
StoughtonState
WIZip Code
53589-3388FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp, Change Management & Pmo Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-123**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sieb, Charles, , ,

Mailing Address 2677 Rolling View Rd

City
StoughtonState
WIZip Code
53589-3388FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp, Change Management & Pmo Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-144**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

308.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sippel, Jeffrey, , ,

Mailing Address 6232 N Berkeley Blvd

City
Whitefish BayState
WIZip Code
53217-4331FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ev & Chief Information Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-287**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sippel, Jeffrey, , ,

Mailing Address 6232 N Berkeley Blvd

City
Whitefish BayState
WIZip Code
53217-4331FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ev & Chief Information Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-74**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smasal, Todd, W, ,Mailing Address 5730 S Forest Park Dr
DCity
Hales CornersState
WIZip Code
53130-2206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp, Total Rewards & Campus Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-236**

Amount of Each Receipt this Period

83.00

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

499.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Smasal, Todd, W, ,Mailing Address 5730 S Forest Park Dr
DCity
Hales CornersState
WIZip Code
53130-2206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp, Total Rewards & Campus Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-254**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smith, Walter, , ,

Mailing Address 860 W Blackhawk St

City
ChicagoState
ILZip Code
60642-2510FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Portfolio Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-145**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smith, Walter, , ,

Mailing Address 860 W Blackhawk St

City
ChicagoState
ILZip Code
60642-2510FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Portfolio Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-167**

Amount of Each Receipt this Period

35.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stanley, Tony, , ,

Mailing Address 3914 White Stone Rd

City
Newtown SqState
PAZip Code
19073-1095FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-63**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stanley, Tony, , ,

Mailing Address 3914 White Stone Rd

City
Newtown SqState
PAZip Code
19073-1095FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-64**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steidinger, Bryce, D, ,

Mailing Address 8656 N Manor Ct

City
Fox PointState
WIZip Code
53217-2346FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Product Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-29**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steidinger, Bryce, D, ,

Mailing Address 8656 N Manor Ct

City
Fox PointState
WIZip Code
53217-2346FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
SR Dir Product Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-35

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steigman, Jason, , ,

Mailing Address 2301 E Newton Ave

City
ShorewoodState
WIZip Code
53211-2617FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Dire Pub Bond

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024

Transaction ID : 20240515193710-297

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steigman, Jason, , ,

Mailing Address 2301 E Newton Ave

City
ShorewoodState
WIZip Code
53211-2617FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Dire Pub Bond

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024

Transaction ID : 2024053119379-24

Amount of Each Receipt this Period

35.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stewart, Thomas, , ,

Mailing Address 7768 Doug Hill Ct

City
San DiegoState
CAZip Code
92127-2500FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-34**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stewart, Thomas, , ,

Mailing Address 7768 Doug Hill Ct

City
San DiegoState
CAZip Code
92127-2500FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-35**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Striano, Peter, F, , III

Mailing Address 3433 NE 31st Ave

City
Lighthouse PointState
FLZip Code
33064-8541FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-35**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

624.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Striano, Peter, F., III

Mailing Address 3433 NE 31st Ave

City
Lighthouse PointState
FLZip Code
33064-8541FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-36**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sullivan, Matthew, P.,

Mailing Address W79N380 Prairie View Rd

City
CedarburgState
WIZip Code
53012-2871FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Financial Analysis & Planni

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-138**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sullivan, Matthew, P.,

Mailing Address W79N380 Prairie View Rd

City
CedarburgState
WIZip Code
53012-2871FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Financial Analysis & Planni

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-159**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 101 OF 122
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tague, Kathryn, M, ,

Mailing Address 10115 Beach Port Dr

City
Winter GardenState
FLZip Code
34787-4413FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp, Field Talent Acquisition &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-14**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tague, Kathryn, M, ,

Mailing Address 10115 Beach Port Dr

City
Winter GardenState
FLZip Code
34787-4413FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp, Field Talent Acquisition &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-37**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Theodore, Scott, P, ,Mailing Address 324 Inverness Dr S
Apt 8101City
EnglewoodState
COZip Code
80112-6196FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-18**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Theodore, Scott, P, ,Mailing Address 324 Inverness Dr S
Apt 8101City
EnglewoodState
COZip Code
80112-6196FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-19**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Timmer, Douglas, D, ,

Mailing Address 13525 N Laurel Ln

City
MequonState
WIZip Code
53097-2427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Securities Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-209**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Timmer, Douglas, D, ,

Mailing Address 13525 N Laurel Ln

City
MequonState
WIZip Code
53097-2427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Securities Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-229**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

408.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tomczak, Bonnie, L, ,

Mailing Address 881 E Birch Ave

City
Whitefish BayState
WIZip Code
53217-5360FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Investment Products & Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-108**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tomczak, Bonnie, L, ,

Mailing Address 881 E Birch Ave

City
Whitefish BayState
WIZip Code
53217-5360FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Investment Products & Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-121**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tronco, Alex, J, ,

Mailing Address 15 Shaker Bay Rd

City
LathamState
NYZip Code
12110-1255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-46**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tronco, Alex, J, ,

Mailing Address 15 Shaker Bay Rd

City
LathamState
NYZip Code
12110-1255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-47**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Trujillo, Steven, A, ,Mailing Address 809 Olive Way
Apt 604City
SeattleState
WAZip Code
98101-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Seattle Netwk Ofc LLCOccupation (for Individual)
Special Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-8**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Trujillo, Steven, A, ,Mailing Address 809 Olive Way
Apt 604City
SeattleState
WAZip Code
98101-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Seattle Netwk Ofc LLCOccupation (for Individual)
Special Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-9**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tucker, Leo, C, ,

Mailing Address 605 Potomac River Rd

City
Mc LeanState
VAZip Code
22102-1402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-31**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tucker, Leo, C, ,

Mailing Address 605 Potomac River Rd

City
Mc LeanState
VAZip Code
22102-1402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-32**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vedder, Andrew, T, ,

Mailing Address 4856 N Bartlett Ave

City
Whitefish BayState
WIZip Code
53217-6016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NML

Occupation (for Individual)

Vp Enterprise Risk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-163**

Amount of Each Receipt this Period

83.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

499.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 OF 122

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vedder, Andrew, T, ,

Mailing Address 4856 N Bartlett Ave

City
Whitefish BayState
WIZip Code
53217-6016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Enterprise Risk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-194**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Verzino, James, Kenneth, ,

Mailing Address 4440 Atoll Ave

City
Sherman OaksState
CAZip Code
91423-3303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Plocher Ins Agy IncOccupation (for Individual)
District Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-1**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Verzino, James, Kenneth, ,

Mailing Address 4440 Atoll Ave

City
Sherman OaksState
CAZip Code
91423-3303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Plocher Ins Agy IncOccupation (for Individual)
District Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-1**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

167.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Villegas, Rebecca, , ,

Mailing Address W319N1019 Balsam Ln

City
DelafieldState
WIZip Code
53018-2633FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Enterprise Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-51**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Villegas, Rebecca, , ,

Mailing Address W319N1019 Balsam Ln

City
DelafieldState
WIZip Code
53018-2633FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Enterprise Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-34**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vrana, Brian, M, ,

Mailing Address 3976 Venezia Vw

City
LeanderState
TXZip Code
78641-3719FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 15 / 2024**Transaction ID : 202405151998-57**

Amount of Each Receipt this Period

42.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 108 OF 122
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vrana, Brian, M, ,

Mailing Address 3976 Venezia Vw

City
LeanderState
TXZip Code
78641-3719FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

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
05 / 31 / 2024**Transaction ID : 2024053119911-58**

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Warren, John, W, ,

Mailing Address 4201 N Murray Ave

City
ShorewoodState
WIZip Code
53211-2013FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Ins

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-230**

Amount of Each Receipt this Period

40.58

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Warren, John, W, ,

Mailing Address 4201 N Murray Ave

City
ShorewoodState
WIZip Code
53211-2013FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Ast Gn Cnl & Ast Sec/Ins

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

405.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-251**

Amount of Each Receipt this Period

40.58

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.16

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wassweiler, Andrew, T, ,Mailing Address 6746 W River Terrace Dr
DCity
FranklinState
WIZip Code
53132-8363FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-72**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wassweiler, Andrew, T, ,Mailing Address 6746 W River Terrace Dr
DCity
FranklinState
WIZip Code
53132-8363FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-97**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Bradford, , ,

Mailing Address 5628 Anita St

City
DallasState
TXZip Code
75206-5308FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Hr Technology Data And Anal

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-16**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Bradford, , ,

Mailing Address 5628 Anita St

City
DallasState
TXZip Code
75206-5308FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Hr Technology Data And Anal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-41**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams-Kemp, Kamilah, D, ,

Mailing Address 8645 N Dean Cir

City
River HillsState
WIZip Code
53217-2038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Evp & Chief Insurance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-81**

Amount of Each Receipt this Period

88.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams-Kemp, Kamilah, D, ,

Mailing Address 8645 N Dean Cir

City
River HillsState
WIZip Code
53217-2038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Evp & Chief Insurance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-104**

Amount of Each Receipt this Period

88.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

276.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Worrell, Richard, , ,

Mailing Address 2423 Beretania Cir

City
CharlotteState
NCZip Code
28211-3631FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-45**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Worrell, Richard, , ,

Mailing Address 2423 Beretania Cir

City
CharlotteState
NCZip Code
28211-3631FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-46**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wright, John, William, , II

Mailing Address 510 King Rd NW

City
AtlantaState
GAZip Code
30342-4011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 202405151998-22**

Amount of Each Receipt this Period

208.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

624.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wright, John, William, , II

Mailing Address 510 King Rd NW

City
AtlantaState
GAZip Code
30342-4011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119911-23**

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Young, Amanda, , ,

Mailing Address 735 W River Edge Ct

City
Oak CreekState
WIZip Code
53154-3738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-95**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Young, Amanda, , ,

Mailing Address 735 W River Edge Ct

City
Oak CreekState
WIZip Code
53154-3738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-110**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

308.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zale, Thomas, D, ,

Mailing Address 2818 E Menlo Blvd

City
ShorewoodState
WIZip Code
53211-2652FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2070.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-294**

Amount of Each Receipt this Period

207.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zale, Thomas, D, ,

Mailing Address 2818 E Menlo Blvd

City
ShorewoodState
WIZip Code
53211-2652FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2070.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-54**

Amount of Each Receipt this Period

207.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zehner, Rick, T, ,

Mailing Address 203 W Ravine Baye Rd

City
BaysideState
WIZip Code
53217-1334FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Research & Special Projects

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1015.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2024**Transaction ID : 20240515193710-54**

Amount of Each Receipt this Period

101.52

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

515.52

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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☐ 17			

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zehner, Rick, T, ,

Mailing Address 203 W Ravine Baye Rd

City
BaysideState
WIZip Code
53217-1334FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NMLOccupation (for Individual)
Vp Research & Special Projects

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2024**Transaction ID : 2024053119379-32**

Amount of Each Receipt this Period

101.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.52

35512.64

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name (Last, First, Middle Initial)

A. Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City
LexingtonState
KYZip Code
40588

Purpose of Disbursement

2024 General

011

Candidate Name

Barr, Andy, H., , IV

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 06

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	2	4	

FEC Identification Number

C C00467571

Transaction ID : 07230E67BC!

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Angus King For U.S. Senate Campaign

Mailing Address PO Box 368

114 MAINE STREET, SUITE 1

City
BrunswickState
MEZip Code
04011-0368

Purpose of Disbursement

2024 Primary

011

Candidate Name

King, Angus, Stanley, , Jr.

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	4	

FEC Identification Number

C C00516047

Transaction ID : BF4F82BA59

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Beepac (BUILDING ECONOMIC EMPOWERMENT PAC)

Mailing Address PO Box 15320

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Beepac (BUILDING ECONOMIC EMPOWERMENT PAC)

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☐ General
☒ Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	4	

FEC Identification Number

C C00494112

Transaction ID : 76A154BE9A

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name (Last, First, Middle Initial)

A. Beyond Thoughts And Prayers PAC

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	2	4	

Mailing Address PO Box 600698

City
NewtonvilleState
MAZip Code
02460

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Beyond Thoughts And Prayers PAC

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

FEC Identification Number

C C00786392

Transaction ID : 64D8C7FEFD

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bill Foster For Congress

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	2	4	

Mailing Address PO Box 9104

City
AuroraState
ILZip Code
60598

Purpose of Disbursement

2024 General

011

Candidate Name

Foster, Bill, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify)

State: IL

District: 11

FEC Identification Number

C C00435099

Transaction ID : 739ED7FD86f

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bob Casey For Senate Inc

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	2	4	

Mailing Address PO Box 58746

City
PhiladelphiaState
PAZip Code
19102

Purpose of Disbursement

2024 General

011

Candidate Name

Casey, Robert, P., , Jr.

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District:

FEC Identification Number

C C00431056

Transaction ID : 19436FA526f

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name (Last, First, Middle Initial)

A. Boots Political Action Committee

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	2	4	

Mailing Address 228 S Washington St
Ste 115City
AlexandriaState
VAZip Code
22314

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Boots Political Action Committee

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☐ General
☒ Other (specify) ▼	

Contribution

State:

District:

FEC Identification Number

C C00567545

Transaction ID : F827518F7B7

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Freedom Fund

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	4	

Mailing Address 824 S Milledge Ave
Ste 101City
AthensState
GAZip Code
30605

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Freedom Fund

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☐ General
☒ Other (specify) ▼	

Contribution

State:

District:

FEC Identification Number

C C00390674

Transaction ID : D2C77A10C8

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Heartland Values PAC

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	4	

Mailing Address PO Box 505

City
Sioux FallsState
SDZip Code
57101-0505

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Heartland Values PAC

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☐ General
☒ Other (specify) ▼	

Contribution

State:

District:

FEC Identification Number

C C00409003

Transaction ID : A6B3DF3439

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name (Last, First, Middle Initial)

A. Himes For CongressMailing Address 857 Post Rd
312City
FairfieldState
CTZip Code
06824

Purpose of Disbursement

2024 General

011

Candidate Name

Himes, James, Andrew, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: CT

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	4		

FEC Identification Number

C C00434191

Transaction ID : D5203406C1f

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hoops PAC

Mailing Address PO Box 3314

City
PortlandState
ORZip Code
97208

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Hoops PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☐ General
☒ Other (specify) Contribution

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	2	4		

FEC Identification Number

C C00392738

Transaction ID : 9B8745A6143

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hoyer For CongressMailing Address 1032 15th St NW
Ste 247City
WashingtonState
DCZip Code
20005

Purpose of Disbursement

2024 General

011

Candidate Name

Hoyer, Steny, Hamilton, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: MD

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	4		

FEC Identification Number

C C00140715

Transaction ID : ACF9CD9B2.

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name (Last, First, Middle Initial)

A. Jimmy Panetta For Congress

Mailing Address PO Box 103

City
Carmel ValleyState
CAZip Code
93924

Purpose of Disbursement

2024 General

011

Candidate Name

Panetta, James, V., ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 19

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y
0	5			1	3		2	0	2	4

FEC Identification Number

C C00592154

Transaction ID : 1DFCD92601!

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mad 4 Pa PAC

Mailing Address PO Box 444

City
GlensideState
PAZip Code
19038

Purpose of Disbursement

2024 General

011

Candidate Name

Dean Cunnane, Madeleine, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify)

State: PA

District: 04

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y
0	5			2	3		2	0	2	4

FEC Identification Number

C C00670844

Transaction ID : 4AB6F0673BI

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Motor City PACMailing Address 611 Pennsylvania Ave SE
Ste 143City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Motor City PAC

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☐ General
☒ Other (specify) ▼
Contribution

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y
0	5			2	3		2	0	2	4

FEC Identification Number

C C00507574

Transaction ID : 042A2041F3I

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

5000.00

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

SCHEDULE B (FEC Form 3X)
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name (Last, First, Middle Initial)

A. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Ter

City
SpringfieldState
MAZip Code
01108

Purpose of Disbursement

2024 General

011

Candidate Name

Neal, Richard, Edmund, ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

State: MA

District: 01

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	4	

FEC Identification Number

C C00226522

Transaction ID : DF2A3A9358

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Madison PACMailing Address 235 State St
Apt 206City
SpringfieldState
MAZip Code
01103

Purpose of Disbursement

2024 Contribution

011

Candidate Name

The Madison PAC

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☐ General
☒ Other (specify) Contribution

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	4	

FEC Identification Number

C C00426809

Transaction ID : D60EBDB93D

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Torres For Congress

Mailing Address PO Box 580303

City
BronxState
NYZip Code
10458

Purpose of Disbursement

2024 Primary

011

Candidate Name

Torres, Ritchie, J., ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 15

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	4	

FEC Identification Number

C C00699744

Transaction ID : 7C531C4B79

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2500.00

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name (Last, First, Middle Initial)

A. Vern Buchanan For Congress

Mailing Address PO Box 48928

City
SarasotaState
FLZip Code
34230

Purpose of Disbursement

2024 Primary

011

Candidate Name

Buchanan, Vernon, Gale, ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 16

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3		2	0	2	4		

FEC Identification Number

C C00412759

Transaction ID : E9E2EFB454

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Victory Now PACMailing Address 10605 Concord St
Ste 202City
KensingtonState
MDZip Code
20895

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Victory Now PAC

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☐ General
☒ Other (specify) Contribution

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3		2	0	2	4		

FEC Identification Number

C C00416743

Transaction ID : 8DD94BDC5D

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

8500.00

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

37000.00

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Political Action Committee (NMPAC)

Full Name (Last, First, Middle Initial)

A. Committee To Elect A Republican Senate

Mailing Address PO Box 2741

City
MadisonState
WIZip Code
53701

Purpose of Disbursement

Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	2	4		

FEC Identification Number

C

Transaction ID : C868EB2A1D

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2000.00

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

2000.00