

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Allstate Insurance Company PAC

ADDRESS (number and street) 2775 Sanders Road Suite A5
 Check if different than previously reported. (ACC)
Northbrook IL 60062

2. **FEC IDENTIFICATION NUMBER** C00040253
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 06 01 2006 through 06 30 2006

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 Steven C. Verney

Signature of Treasurer Electronically Filed by Steven C. Verney Date 07 19 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		113864.78
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	129685.27									
(c) Total Receipts (from Line 19)	29384.40	206861.72								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	159069.67	320726.50								
7. Total Disbursements (from Line 31)	35946.15	197602.98								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	123123.52	123123.52								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	26390.85	107042.80
(i) Itemized (use Schedule A)	2992.85	99314.96
(ii) Unitemized	29383.70	206357.76
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	29383.70	206357.76
12. Transfers From Affiliated/Other Party Committees .....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received .....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	.00	500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.70	3.96
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	29384.40	206861.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	29384.40	206861.72

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	146.15	1052.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	146.15	1052.98
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	17000.00	76500.00
24. Independent Expenditure (use Schedule E) .....	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	.00	.00
29. Other Disbursements.....	18800.00	120050.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share .....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35946.15	197602.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	35946.15	197602.98

DETAILED SUMMARY PAGE
of Disbursements

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)	29383.70	206357.76
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29383.70	206357.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	146.15	1052.98
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	146.15	552.98

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. REBECCA A ABEL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 657 CORAL COURT		Transaction ID: A2006-975602	
City LINDENHURST	State IL	Amount of Each Receipt this Period 21.80	
Zip Code 60046		Amount of Each Receipt this Period 21.80	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.80	
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	Amount of Each Receipt this Period 21.80	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.60	Amount of Each Receipt this Period 21.80	

Full Name (Last, First, Middle Initial) B. REBECCA A ABEL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 657 CORAL COURT		Transaction ID: A2006-976931	
City LINDENHURST	State IL	Amount of Each Receipt this Period 21.80	
Zip Code 60046		Amount of Each Receipt this Period 21.80	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.80	
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	Amount of Each Receipt this Period 21.80	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.40	Amount of Each Receipt this Period 21.80	

Full Name (Last, First, Middle Initial) C. ERNEST D ADAMS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 33934 N TREELINE CT		Transaction ID: A2006-975281	
City GAGES LAKE	State IL	Amount of Each Receipt this Period 18.32	
Zip Code 60030		Amount of Each Receipt this Period 18.32	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.32	
Name of Employer Allstate Insurance Company	Occupation Field Operations Director	Amount of Each Receipt this Period 18.32	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.19	Amount of Each Receipt this Period 18.32	

SUBTOTAL of Receipts This Page (optional) ▶	61.92
TOTAL This Period (last page this line number only) ▶	61.92

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ERNEST D ADAMS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 33934 N TREELINE CT		Transaction ID: A2006-976642
City GAGES LAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.32
Name of Employer Allstate Insurance Company	Occupation Field Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.51	

Full Name (Last, First, Middle Initial) B. JONES G ADUKEH		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1226 RIDGEWOOD LANE		Transaction ID: A2006-975517
City LAKE VILLA	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.69
Name of Employer Allstate Insurance Company	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.98	

Full Name (Last, First, Middle Initial) C. LORA L ADUKEH		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1226 RIDGEWOOD LANE		Transaction ID: A2006-975586
City LAKE VILLA	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.10
Name of Employer Allstate Insurance Company	Occupation STAFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.40	

SUBTOTAL of Receipts This Page (optional)	76.11
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 263
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JONES G ADUKEH		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1226 RIDGEWOOD LANE		Transaction ID: A2006-976849
City LAKE VILLA	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.69
Name of Employer Allstate Insurance Company	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.67	

Full Name (Last, First, Middle Initial) B. LORAL ADUKEH		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1226 RIDGEWOOD LANE		Transaction ID: A2006-976915
City LAKE VILLA	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.10
Name of Employer Allstate Insurance Company	Occupation STAFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.50	

Full Name (Last, First, Middle Initial) C. MICHAEL W AGAR		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 200 W MILL VALLEY DR		Transaction ID: A2006-976816
City COLLEYVILLE	State TX	Zip Code 76034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.05	

SUBTOTAL of Receipts This Page (optional)	74.14
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ERIKA S AHERN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 143 EAST WOOD STREET		Transaction ID: A2006-975144	
City State Zip Code PALATINE IL 60067	Amount of Each Receipt this Period 21.82		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Counsel III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.14		

Full Name (Last, First, Middle Initial) B. ERIKA S AHERN		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 143 EAST WOOD STREET		Transaction ID: A2006-976514	
City State Zip Code PALATINE IL 60067	Amount of Each Receipt this Period 21.82		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Counsel III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.96		

Full Name (Last, First, Middle Initial) C. PATRICIA A AITKEN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1245 CARIBOU LANE		Transaction ID: A2006-975319	
City State Zip Code HOFFMAN ESTATES IL 60192	Amount of Each Receipt this Period 19.64		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.05		

SUBTOTAL of Receipts This Page (optional) ▶	63.28
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PATRICIA A AITKEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1245 CARIBOU LANE		Transaction ID: A2006-976678	
City State Zip Code HOFFMAN ESTATES IL 60192	Amount of Each Receipt this Period 19.92		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.97		

Full Name (Last, First, Middle Initial) B. NANCY H ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-975330	
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 27.14		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Accounting Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.08		

Full Name (Last, First, Middle Initial) C. NANCY H ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-976687	
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 27.14		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Accounting Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.22		

SUBTOTAL of Receipts This Page (optional) ▶	74.20
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID ASCHENBRENNER

Mailing Address 330 FAIRWAY VIEW DRIVE

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 389.30

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975497

Amount of Each Receipt this Period
29.60

B. Full Name (Last, First, Middle Initial)
ROBERTA S ASHER

Mailing Address 1439 N KEYSTONE

City State Zip Code
RIVER FOREST IL 60305

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

Name of Employer Allstate Insurance Company Occupation Senior Portfolio Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 237.36

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975417

Amount of Each Receipt this Period
29.79

C. Full Name (Last, First, Middle Initial)
WILLIAM H AYO

Mailing Address 1009 LAKE RIDGE DR.

City State Zip Code
SAFETY HARBOR FL 34695

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

Name of Employer Allstate Insurance Company Occupation Human Resource Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.55

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976626

Amount of Each Receipt this Period
16.35

SUBTOTAL of Receipts This Page (optional) ► 75.74

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN P BADER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 438 MITCHELL DRIVE		Transaction ID: A2006-975138
City GRAYS LAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 64.50
Name of Employer Allstate Insurance Company	Occupation VP Enterprise Infrastruct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 738.58	

Full Name (Last, First, Middle Initial) B. JOHN P BADER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 438 MITCHELL DRIVE		Transaction ID: A2006-976508
City GRAYS LAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 64.50
Name of Employer Allstate Insurance Company	Occupation VP Enterprise Infrastruct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 803.08	

Full Name (Last, First, Middle Initial) C. CHARLES C BAGGS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 4435 SWILCAN BRIDGE LANE N		Transaction ID: A2006-975247
City JACKSONVILLE	State FL	Zip Code 32224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.66
Name of Employer Allstate Insurance Company	Occupation AVP-Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.90	

SUBTOTAL of Receipts This Page (optional)	▶	158.66
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CHARLES C BAGGS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 4435 SWILCAN BRIDGE LANE N		Transaction ID: A2006-976611
City State Zip Code JACKSONVILLE FL 32224	Amount of Each Receipt this Period 29.66	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP-Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 379.56	

Full Name (Last, First, Middle Initial) B. DIANE G BAKER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 120 EAST SHERIDAN RD		Transaction ID: A2006-975242
City State Zip Code LAKE BLUFF IL 60044	Amount of Each Receipt this Period 46.36	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP-PRODUCT OPS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.92	

Full Name (Last, First, Middle Initial) C. RICHARD L BAKER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1125 W ACORN TRAIL		Transaction ID: A2006-975295
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 59.95	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Internal S	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 705.19	

SUBTOTAL of Receipts This Page (optional) ▶	135.97
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DIANE G BAKER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 120 EAST SHERIDAN RD		Transaction ID: A2006-976606	
City State Zip Code LAKE BLUFF IL 60044	Amount of Each Receipt this Period 46.36		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP-PRODUCT OPS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 587.28		

Full Name (Last, First, Middle Initial) B. RICHARD L BAKER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1125 W ACORN TRAIL		Transaction ID: A2006-976655	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 59.95		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Internal S		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.14		

Full Name (Last, First, Middle Initial) C. ROBERT Z BAKER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 3012 THORNHILL DRIVE		Transaction ID: A2006-976945	
City State Zip Code GRANITE BAY CA 95746	Amount of Each Receipt this Period 16.01		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.08		

SUBTOTAL of Receipts This Page (optional) ▶	122.32
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GARRY J BALLEK

Mailing Address 1013 MASON LANE

City State Zip Code
LAKE IN THE HIL IL 60156

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

Name of Employer Allstate Insurance Company Occupation Unclassified Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.65

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975401

Amount of Each Receipt this Period
18.80

B. Full Name (Last, First, Middle Initial)
GARRY J BALLEK

Mailing Address 1013 MASON LANE

City State Zip Code
LAKE IN THE HIL IL 60156

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

Name of Employer Allstate Insurance Company Occupation Unclassified Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.45

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976747

Amount of Each Receipt this Period
18.80

C. Full Name (Last, First, Middle Initial)
WILLIAM P BALLINGER

Mailing Address 47530 ABERDEEN DR

City State Zip Code
NOVI MI 48374

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

Name of Employer Allstate Insurance Company Occupation FVP President New Jersey

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.48

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975217

Amount of Each Receipt this Period
32.31

SUBTOTAL of Receipts This Page (optional)	▶	69.91
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM P BALLINGER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 47530 ABERDEEN DR		Transaction ID: A2006-976581	
City State Zip Code NOVI MI 48374	Amount of Each Receipt this Period 32.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation FVP President New Jersey		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.79		

Full Name (Last, First, Middle Initial) B. ROBERT H BARGE III		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 2222 LOCH WAY		Transaction ID: A2006-975600	
City State Zip Code EL DORADO HILLS CA 95762	Amount of Each Receipt this Period 61.49		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 721.36		

Full Name (Last, First, Middle Initial) C. ROBERT H BARGE III		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 2222 LOCH WAY		Transaction ID: A2006-976929	
City State Zip Code EL DORADO HILLS CA 95762	Amount of Each Receipt this Period 61.49		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 782.85		

SUBTOTAL of Receipts This Page (optional) ▶	155.29
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICK J BARKLEY

Mailing Address 1694 WARRINGTON LANE

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Allstate Insurance Company Occupation Consultant-M1400

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.98

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976708

Amount of Each Receipt this Period
15.46

B. Full Name (Last, First, Middle Initial)
DAVID J BAUMGARDNER

Mailing Address 12620 Lake Normandy Lane

City State Zip Code
Fairfax VA 22030

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.09

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975292

Amount of Each Receipt this Period
23.72

C. Full Name (Last, First, Middle Initial)
DAVID J BAUMGARDNER

Mailing Address 12620 Lake Normandy Lane

City State Zip Code
Fairfax VA 22030

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 303.81

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976653

Amount of Each Receipt this Period
23.72

SUBTOTAL of Receipts This Page (optional)	▶	62.90
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT K BECKER

Mailing Address 80 RAVINE DRIVE

City COLONIA State NJ Zip Code 07067

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.56

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975158

Amount of Each Receipt this Period
19.88

B. Full Name (Last, First, Middle Initial)
ROBERT K BECKER

Mailing Address 80 RAVINE DRIVE

City COLONIA State NJ Zip Code 07067

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 258.44

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976527

Amount of Each Receipt this Period
19.88

C. Full Name (Last, First, Middle Initial)
CANDICE L BEINLICH

Mailing Address 1781 TUDOR LANE # 309

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Human Resource Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.68

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975346

Amount of Each Receipt this Period
17.94

SUBTOTAL of Receipts This Page (optional) ▶ 57.70

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CANDICE L BEINLICH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1781 TUDOR LANE # 309		Transaction ID: A2006-976702	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 17.94
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.62		

Full Name (Last, First, Middle Initial) B. DIANE BELLAS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 632 Concord Way		Transaction ID: A2006-975357	
City Prospect Heights	State IL	Zip Code 60070	Amount of Each Receipt this Period 23.31
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Accounting Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.37		

Full Name (Last, First, Middle Initial) C. DIANE BELLAS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 632 Concord Way		Transaction ID: A2006-976710	
City Prospect Heights	State IL	Zip Code 60070	Amount of Each Receipt this Period 23.31
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Accounting Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.68		

SUBTOTAL of Receipts This Page (optional) ▶	64.56
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WALTER A BERKOWICZ		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 405 GATESHEAD DRIVE		Transaction ID: A2006-975435
City State Zip Code NAPERVILLE IL 60565	Amount of Each Receipt this Period 30.54	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.58	

Full Name (Last, First, Middle Initial) B. WALTER A BERKOWICZ		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 405 GATESHEAD DRIVE		Transaction ID: A2006-976779
City State Zip Code NAPERVILLE IL 60565	Amount of Each Receipt this Period 30.54	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.12	

Full Name (Last, First, Middle Initial) C. EDWARD A BIEMER		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 807 Greenwood Ave.		Transaction ID: A2006-975180
City State Zip Code GLENCOE IL 60022	Amount of Each Receipt this Period 37.71	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP and President Broker D	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 441.11	

SUBTOTAL of Receipts This Page (optional) ▶	98.79
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 263
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
GLENCOE IL 60022

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

Name of Employer Allstate Insurance Company Occupation VP and President Broker D

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 478.82

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976547

Amount of Each Receipt this Period
37.71

B. Full Name (Last, First, Middle Initial)
DAVID G BIEMILLER

Mailing Address 480 LEES LAKE RD

City State Zip Code
FAYETTEVILLE GA 30214

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

Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.96

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975263

Amount of Each Receipt this Period
18.63

C. Full Name (Last, First, Middle Initial)
DAVID G BIEMILLER

Mailing Address 480 LEES LAKE RD

City State Zip Code
FAYETTEVILLE GA 30214

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

Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.59

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976627

Amount of Each Receipt this Period
18.63

SUBTOTAL of Receipts This Page (optional)	74.97
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANN L BIERNACKI		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 11 Heron Drive		Transaction ID: A2006-975376
City State Zip Code Palatine IL 60067	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 7.29
Name of Employer Allstate Insurance Company	Occupation Staff Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.87	

Full Name (Last, First, Middle Initial) B. DAVID A BIRD		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 24567 HARBOUR VIEW DRIVE		Transaction ID: A2006-975520
City State Zip Code PONTE VEDRA BEA FL 32082	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 37.28
Name of Employer Allstate Insurance Company	Occupation President-Allstate Workpl	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.99	

Full Name (Last, First, Middle Initial) C. DAVID A BIRD		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 24567 HARBOUR VIEW DRIVE		Transaction ID: A2006-976852
City State Zip Code PONTE VEDRA BEA FL 32082	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 37.28
Name of Employer Allstate Insurance Company	Occupation President-Allstate Workpl	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 478.27	

SUBTOTAL of Receipts This Page (optional)	81.85
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT L BLOCK		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 398 Brookmont Lane		Transaction ID: A2006-975505
City State Zip Code North Barrington IL 60010	Amount of Each Receipt this Period 57.33	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Investor R	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 672.42	

Full Name (Last, First, Middle Initial) B. ROBERT L BLOCK		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 398 Brookmont Lane		Transaction ID: A2006-976839
City State Zip Code North Barrington IL 60010	Amount of Each Receipt this Period 57.33	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Investor R	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 729.75	

Full Name (Last, First, Middle Initial) C. RAYMOND R BOGAERT		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 187 IMPERIAL COURT		Transaction ID: A2006-975381
City State Zip Code PALATINE IL 60067	Amount of Each Receipt this Period 49.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.43	

SUBTOTAL of Receipts This Page (optional) ▶	163.81
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CHARLES A BOLLINGER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 509 GATES HEAD SOUTH		Transaction ID: A2006-975301
City State Zip Code ELK GROVE VLLGE IL 60007	Amount of Each Receipt this Period 46.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Agency Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.11	

Full Name (Last, First, Middle Initial) B. CHARLES A BOLLINGER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 509 GATES HEAD SOUTH		Transaction ID: A2006-976661
City State Zip Code ELK GROVE VLLGE IL 60007	Amount of Each Receipt this Period 46.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Agency Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 571.26	

Full Name (Last, First, Middle Initial) C. MICHAEL E BOND		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1246 PRAIRIE ORCHID LANE		Transaction ID: A2006-975465
City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 26.17	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation F&P/Enterprise Risk Manag	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.14	

SUBTOTAL of Receipts This Page (optional) ▶	118.47
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL E BOND		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1246 PRAIRIE ORCHID LANE		Transaction ID: A2006-976807	
City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 26.17		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation F&P/Enterprise Risk Manag		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.31		

Full Name (Last, First, Middle Initial) B. CAROL L BONOVIK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 6 N. MILLERS LANE		Transaction ID: A2006-976768	
City State Zip Code MT. PROSPECT IL 60056	Amount of Each Receipt this Period 15.86		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.78		

Full Name (Last, First, Middle Initial) C. DOUGLAS L BORG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 5550 Maybeck Ln		Transaction ID: A2006-975597	
City State Zip Code Livermore CA 94550	Amount of Each Receipt this Period 24.40		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.00		

SUBTOTAL of Receipts This Page (optional) ▶	66.43
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DOUGLAS L BORG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 5550 Maybeck Ln		Transaction ID: A2006-976926	
City State Zip Code Livermore CA 94550	Amount of Each Receipt this Period 24.40		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.40		

Full Name (Last, First, Middle Initial) B. MICHAEL B BOYLE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1063 CHERRY STREET		Transaction ID: A2006-975221	
City State Zip Code WINNETKA IL 60093	Amount of Each Receipt this Period 71.08		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Info Techn		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 836.16		

Full Name (Last, First, Middle Initial) C. MICHAEL B BOYLE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1063 CHERRY STREET		Transaction ID: A2006-976585	
City State Zip Code WINNETKA IL 60093	Amount of Each Receipt this Period 71.08		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Info Techn		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 907.24		

SUBTOTAL of Receipts This Page (optional) ▶	166.56
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LONDON B BRADLEY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1951 BROADSMORE		Transaction ID: A2006-975562	
City State Zip Code ALGONQUIN IL 60102	Amount of Each Receipt this Period 19.63		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.46		

Full Name (Last, First, Middle Initial) B. LONDON B BRADLEY		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1951 BROADSMORE		Transaction ID: A2006-976892	
City State Zip Code ALGONQUIN IL 60102	Amount of Each Receipt this Period 19.63		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.09		

Full Name (Last, First, Middle Initial) C. KENNETH A BRANCH		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 28955 NIBLICK KNOLL CT.		Transaction ID: A2006-975527	
City State Zip Code IVANHOE IL 60060	Amount of Each Receipt this Period 19.45		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.20		

SUBTOTAL of Receipts This Page (optional) ▶	58.71
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KENNETH A BRANCH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 28955 NIBLICK KNOLL CT.		Transaction ID: A2006-976858	
City State Zip Code IVANHOE IL 60060	Amount of Each Receipt this Period 20.61		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.81		

Full Name (Last, First, Middle Initial) B. JEFFREY P BRASK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 21285 S. BOSCHOME CIRCLE		Transaction ID: A2006-975387	
City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 19.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.06		

Full Name (Last, First, Middle Initial) C. JEFFREY P BRASK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 21285 S. BOSCHOME CIRCLE		Transaction ID: A2006-976733	
City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 19.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.29		

SUBTOTAL of Receipts This Page (optional) ▶	59.07
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SHEILA M BREEDING		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 35 FAIRMONT AVENUE		Transaction ID: A2006-975164
City SOMERVILLE	State NJ	Zip Code 08876
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Senior Field Corporate Re	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.93	

Full Name (Last, First, Middle Initial) B. SHEILA M BREEDING		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 35 FAIRMONT AVENUE		Transaction ID: A2006-976532
City SOMERVILLE	State NJ	Zip Code 08876
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Senior Field Corporate Re	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.28	

Full Name (Last, First, Middle Initial) C. KATHLEEN M BRESNAHAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1379 ORLEANS DRIVE UNIT D		Transaction ID: A2006-975304
City MUNDELEIN	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.48
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.46	

SUBTOTAL of Receipts This Page (optional)	▶	54.18
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.33

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975203

Amount of Each Receipt this Period
17.49

B. Full Name (Last, First, Middle Initial)
DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.82

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976568

Amount of Each Receipt this Period
17.49

C. Full Name (Last, First, Middle Initial)
SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 439.13

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975368

Amount of Each Receipt this Period
37.19

SUBTOTAL of Receipts This Page (optional)	▶	72.17
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SHAWN L BROADFIELD		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1044 APPLE BLOSSOM COURT		Transaction ID: A2006-976720
City LAKE ZURICH	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.19
Name of Employer Allstate Insurance Company	Occupation Finance Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.32	

Full Name (Last, First, Middle Initial) B. DAVID C BROCK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 305 CHURCHILL LANE		Transaction ID: A2006-975230
City GURNEE	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.47
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Planning Con	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.54	

Full Name (Last, First, Middle Initial) C. J D BROCK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 4958 DAY LILY WAY		Transaction ID: A2006-975526
City ACWORTH	State GA	Zip Code 30102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.87
Name of Employer Allstate Insurance Company	Occupation Regional Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 377.79	

SUBTOTAL of Receipts This Page (optional)	102.53
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID C BROCK

Mailing Address 305 CHURCHILL LANE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Planning Con

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 429.01

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976594

Amount of Each Receipt this Period
33.47

B. Full Name (Last, First, Middle Initial)
J D BROCK

Mailing Address 4958 DAY LILY WAY

City State Zip Code
ACWORTH GA 30102

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

Name of Employer Allstate Insurance Company Occupation Regional Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 409.66

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976857

Amount of Each Receipt this Period
31.87

C. Full Name (Last, First, Middle Initial)
RAYMOND L BROEDER

Mailing Address 18602 STERLING CT.

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 244.39

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975489

Amount of Each Receipt this Period
25.71

SUBTOTAL of Receipts This Page (optional) ► 91.05

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM F BROKAW		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 3 MILTON CT		Transaction ID: A2006-975361	
City State Zip Code CARY IL 60013	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.56		

Full Name (Last, First, Middle Initial) B. WILLIAM F BROKAW		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 3 MILTON CT		Transaction ID: A2006-976714	
City State Zip Code CARY IL 60013	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.44		

Full Name (Last, First, Middle Initial) C. WILLIAM J BROOKS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 121 HOLLENDEN LANE		Transaction ID: A2006-975260	
City State Zip Code MADISON MS 39110	Amount of Each Receipt this Period 25.47		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.94		

SUBTOTAL of Receipts This Page (optional) ▶	65.23
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM J BROOKS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 121 HOLLENDEN LANE		Transaction ID: A2006-976624
City MADISON	State MS	Zip Code 39110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.47
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.41	

Full Name (Last, First, Middle Initial) B. LORRIE K BROUSE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 223 POLK PLACE DRIVE		Transaction ID: A2006-976598
City FRANKLIN	State TN	Zip Code 37064
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.62
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.66	

Full Name (Last, First, Middle Initial) C. BETH A BROWN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 2637 W. WILSON AVE.		Transaction ID: A2006-975305
City CHICAGO	State IL	Zip Code 60625
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.77
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 477.24	

SUBTOTAL of Receipts This Page (optional)	81.86
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAMELA S BROWN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 5886 TEAL LANE		Transaction ID: A2006-975472	
City LONG GROVE	State IL	Zip Code 60047	Amount of Each Receipt this Period 19.86
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.27		

Full Name (Last, First, Middle Initial) B. MICHAEL E BROWN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 8739 CYPRESS RESERVE CIRCLE		Transaction ID: A2006-976549	
City ORLANDO	State FL	Zip Code 32836	Amount of Each Receipt this Period 16.35
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Agency Consulting Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.55		

Full Name (Last, First, Middle Initial) C. BETH A BROWN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 2637 W. WILSON AVE.		Transaction ID: A2006-976664	
City CHICAGO	State IL	Zip Code 60625	Amount of Each Receipt this Period 39.77
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 517.01		

SUBTOTAL of Receipts This Page (optional) ▶	75.98
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAMELA S BROWN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 5886 TEAL LANE		Transaction ID: A2006-976814	
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 19.86		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.13		

Full Name (Last, First, Middle Initial) B. CATHERINE S BRUNE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 190 SAVANNA CT		Transaction ID: A2006-975246	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 161.54		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP & Chief Information O		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1884.65		

Full Name (Last, First, Middle Initial) C. CATHERINE S BRUNE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 190 SAVANNA CT		Transaction ID: A2006-976610	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 161.54		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP & Chief Information O		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2046.19		

SUBTOTAL of Receipts This Page (optional) ▶	342.94
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANNE MARIE L BRUNNER		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 2514 SOUTH WESLEY AVE		Transaction ID: A2006-975362
City BERWYN	State IL	Zip Code 60402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.54
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 397.63	

Full Name (Last, First, Middle Initial) B. ANNE MARIE L BRUNNER		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 2514 SOUTH WESLEY AVE		Transaction ID: A2006-976715
City BERWYN	State IL	Zip Code 60402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.54
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 431.17	

Full Name (Last, First, Middle Initial) C. JOHN C BRUSE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 1434 WOODACRE DRIVE		Transaction ID: A2006-975574
City MC LEAN	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.00
Name of Employer Allstate Insurance Company	Occupation Vice President & Ast Gene	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 367.82	

SUBTOTAL of Receipts This Page (optional)	101.08
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN C BRUSE		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 1434 WOODACRE DRIVE		Transaction ID: A2006-976904
City MC LEAN	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.00
Name of Employer Allstate Insurance Company	Occupation Vice President & Ast Gene	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.82	

Full Name (Last, First, Middle Initial) B. STEVEN C BUCHHOLZ		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 412 S. VAIL		Transaction ID: A2006-975323
City ARL HEIGHTS	State IL	Zip Code 60005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.92
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.24	

Full Name (Last, First, Middle Initial) C. STEVEN C BUCHHOLZ		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 412 S. VAIL		Transaction ID: A2006-976681
City ARL HEIGHTS	State IL	Zip Code 60005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.92
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 379.16	

SUBTOTAL of Receipts This Page (optional)	93.84
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. NANCY M BUFALINO		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 250 E. PEARSON #1701		Transaction ID: A2006-975392
City State Zip Code CHICAGO IL 60611	Amount of Each Receipt this Period 22.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Finance and Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.61	

Full Name (Last, First, Middle Initial) B. NANCY M BUFALINO		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 250 E. PEARSON #1701		Transaction ID: A2006-976738
City State Zip Code CHICAGO IL 60611	Amount of Each Receipt this Period 22.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Finance and Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.11	

Full Name (Last, First, Middle Initial) C. DAVID N BUGGS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 12234 85TH AVE		Transaction ID: A2006-975506
City State Zip Code PLEASANT PR WI 53158	Amount of Each Receipt this Period 31.82	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 381.84	

SUBTOTAL of Receipts This Page (optional) ▶	76.82
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DAVID N BUGGS		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 12234 85TH AVE		Transaction ID: A2006-976840	
City State Zip Code PLEASANT PR WI 53158	Amount of Each Receipt this Period 31.82		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 413.66		

Full Name (Last, First, Middle Initial) B. KAREN E BURCKHARDT		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 730 E. HAWTHORNE		Transaction ID: A2006-975504	
City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 39.68		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP-Product		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.45		

Full Name (Last, First, Middle Initial) C. KAREN E BURCKHARDT		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 730 E. HAWTHORNE		Transaction ID: A2006-976838	
City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 39.68		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP-Product		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 505.13		

SUBTOTAL of Receipts This Page (optional) ▶	111.18
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. GREGORY C BURNS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2000 N. BROADMOOR LANE		Transaction ID: A2006-976554
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 16.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.60	

Full Name (Last, First, Middle Initial) B. PEGGY BURROWS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 2628 HALSEY DRIVE		Transaction ID: A2006-975539
City State Zip Code FLOWER MOUND TX 75028	Amount of Each Receipt this Period 28.43	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.41	

Full Name (Last, First, Middle Initial) C. PEGGY BURROWS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2628 HALSEY DRIVE		Transaction ID: A2006-976870
City State Zip Code FLOWER MOUND TX 75028	Amount of Each Receipt this Period 28.43	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.84	

SUBTOTAL of Receipts This Page (optional) ▶	73.36
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CECILE A BUTLER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 9309 ELIZABETH LANE		Transaction ID: A2006-975120
City State Zip Code SPRING GROVE IL 60081	Amount of Each Receipt this Period 83.91	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP & Tax Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 983.47	

Full Name (Last, First, Middle Initial) B. CECILE A BUTLER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 9309 ELIZABETH LANE		Transaction ID: A2006-976491
City State Zip Code SPRING GROVE IL 60081	Amount of Each Receipt this Period 83.91	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP & Tax Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1067.38	

Full Name (Last, First, Middle Initial) C. D C BUTLER III		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 15430 WHITE COLUMNS DRIVE		Transaction ID: A2006-975243
City State Zip Code ALPHARETTA GA 30004	Amount of Each Receipt this Period 50.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 586.03	

SUBTOTAL of Receipts This Page (optional) ▶	218.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. D C BUTLER III		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 15430 WHITE COLUMNS DRIVE		Transaction ID: A2006-976607
City State Zip Code ALPHARETTA GA 30004	Amount of Each Receipt this Period 50.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 636.26	

Full Name (Last, First, Middle Initial) B. ALICE M BYRNE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 4121 109TH STREET		Transaction ID: A2006-975499
City State Zip Code PLEASANT PRAIRI WI 53158	Amount of Each Receipt this Period 17.91	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.39	

Full Name (Last, First, Middle Initial) C. ALICE M BYRNE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 4121 109TH STREET		Transaction ID: A2006-976833
City State Zip Code PLEASANT PRAIRI WI 53158	Amount of Each Receipt this Period 17.91	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.30	

SUBTOTAL of Receipts This Page (optional) ▶	86.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DEBORAH K CAMPBELL		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 21863 NORTH TALL OAKS COURT		Transaction ID: A2006-975480
City State Zip Code KILDEER IL 60047	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 57.81
Name of Employer Allstate Insurance Company	Occupation Vice President Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 681.61	

Full Name (Last, First, Middle Initial) B. DEBORAH K CAMPBELL		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 21863 NORTH TALL OAKS COURT		Transaction ID: A2006-976820
City State Zip Code KILDEER IL 60047	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 57.81
Name of Employer Allstate Insurance Company	Occupation Vice President Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 739.42	

Full Name (Last, First, Middle Initial) C. RAYMOND CELAYA		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 21910 WEST PINE LAKE CIRCLE		Transaction ID: A2006-975616
City State Zip Code KILDEER IL 60047	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 28.89
Name of Employer Allstate Insurance Company	Occupation AVP Procurement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.74	

SUBTOTAL of Receipts This Page (optional)	▶	144.51
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. IRIS M CHESTER		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 643 ST GEORGE CT		Transaction ID: A2006-975516	
City LAKE FOREST	State IL	Zip Code 60045	Amount of Each Receipt this Period 20.32
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.38		

Full Name (Last, First, Middle Initial) B. IRIS M CHESTER		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 643 ST GEORGE CT		Transaction ID: A2006-976848	
City LAKE FOREST	State IL	Zip Code 60045	Amount of Each Receipt this Period 20.32
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.70		

Full Name (Last, First, Middle Initial) C. DELIA M CHILGREN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 2441-5TH AVENUE		Transaction ID: A2006-975618	
City SACRAMENTO	State CA	Zip Code 95818	Amount of Each Receipt this Period 11.93
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 446.59		

SUBTOTAL of Receipts This Page (optional) ▶	52.57
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SCOTT M CHRISTENSEN		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 20713 LEXINGTON LANE		Transaction ID: A2006-975425
City KILDEER	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.47
Name of Employer Allstate Insurance Company	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.49	

Full Name (Last, First, Middle Initial) B. SCOTT M CHRISTENSEN		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 20713 LEXINGTON LANE		Transaction ID: A2006-976769
City KILDEER	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.47
Name of Employer Allstate Insurance Company	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.96	

Full Name (Last, First, Middle Initial) C. MICHAEL A CLARK		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 26115 N 104TH WAY		Transaction ID: A2006-975159
City SCOTTSDALE	State AZ	Zip Code 85255
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.96
Name of Employer Allstate Insurance Company	Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 489.52	

SUBTOTAL of Receipts This Page (optional)	112.90
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. EDWARD T CLARK		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 2907 GLENARYE DR		Transaction ID: A2006-975454	
City LINDENHURST	State IL	Amount of Each Receipt this Period 17.00	
Zip Code 60046			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Regional Marketing Manage		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.90		

Full Name (Last, First, Middle Initial) B. MICHAEL A CLARK		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 26115 N 104TH WAY		Transaction ID: A2006-976528	
City SCOTTSDALE	State AZ	Amount of Each Receipt this Period 41.96	
Zip Code 85255			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 531.48		

Full Name (Last, First, Middle Initial) C. EDWARD T CLARK		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 2907 GLENARYE DR		Transaction ID: A2006-976796	
City LINDENHURST	State IL	Amount of Each Receipt this Period 17.00	
Zip Code 60046			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Regional Marketing Manage		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.90		

SUBTOTAL of Receipts This Page (optional) ▶	75.96
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS IL 60558

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

Name of Employer Allstate Insurance Company Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377.51

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975291

Amount of Each Receipt this Period
32.13

B. Full Name (Last, First, Middle Initial)
MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS IL 60558

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

Name of Employer Allstate Insurance Company Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 409.64

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976652

Amount of Each Receipt this Period
32.13

C. Full Name (Last, First, Middle Initial)
DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
PALM HARBOR FL 34685

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

Name of Employer Allstate Insurance Company Occupation Senior Field Corporate Re

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 314.42

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975453

Amount of Each Receipt this Period
26.71

SUBTOTAL of Receipts This Page (optional) ► 90.97

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
PALM HARBOR FL 34685

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

Name of Employer Allstate Insurance Company Occupation Senior Field Corporate Re

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.13

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976795

Amount of Each Receipt this Period
26.71

B. Full Name (Last, First, Middle Initial)
LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.39

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975411

Amount of Each Receipt this Period
30.12

C. Full Name (Last, First, Middle Initial)
LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.51

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976757

Amount of Each Receipt this Period
30.12

SUBTOTAL of Receipts This Page (optional) ▶ **86.95**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
WILLIAM C COLE

Mailing Address 6796 LIVINGSTON DR.

City State Zip Code
HUNTINGTON BCH CA 92648

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

Name of Employer Allstate Insurance Company Occupation Managing Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.55

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976934

Amount of Each Receipt this Period
16.35

B. Full Name (Last, First, Middle Initial)
EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 528.93

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975347

Amount of Each Receipt this Period
39.77

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

Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 568.70

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976703

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional) ► **95.89**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL P COOGAN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1609 SYRACUSE LN.		Transaction ID: A2006-975414	
City State Zip Code SCHAUMBURG IL 60193	Amount of Each Receipt this Period 28.11		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.87		

Full Name (Last, First, Middle Initial) B. MICHAEL P COOGAN		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1609 SYRACUSE LN.		Transaction ID: A2006-976760	
City State Zip Code SCHAUMBURG IL 60193	Amount of Each Receipt this Period 28.11		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.98		

Full Name (Last, First, Middle Initial) C. JOAN M COONEY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 615 W. PARK ST.		Transaction ID: A2006-975354	
City State Zip Code ARLINGTON HTS IL 60005	Amount of Each Receipt this Period 11.21		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.86		

SUBTOTAL of Receipts This Page (optional) ▶	67.43
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RONALD L CORBIN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 14 Portrush Place		Transaction ID: A2006-975533
City BRENTWOOD	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 64.28
Name of Employer Allstate Insurance Company	Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.07	

Full Name (Last, First, Middle Initial) B. RONALD L CORBIN		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 14 Portrush Place		Transaction ID: A2006-976864
City BRENTWOOD	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 64.28
Name of Employer Allstate Insurance Company	Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 818.35	

Full Name (Last, First, Middle Initial) C. THOMAS J CREAGH		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 4008 NORTH HIGHLAND AVENUE		Transaction ID: A2006-975161
City ARLINGTON HTS	State IL	Zip Code 60004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.69
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.33	

SUBTOTAL of Receipts This Page (optional) ▶	148.25
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. THOMAS J CREAGH		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 4008 NORTH HIGHLAND AVENUE		Transaction ID: A2006-976530
City State Zip Code ARLINGTON HTS IL 60004	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.69
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.02	

Full Name (Last, First, Middle Initial) B. WILLIAM G CRIMMINS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 218 S KASPAR		Transaction ID: A2006-975302
City State Zip Code ARLINGTON HGTS. IL 60005	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 67.74
Name of Employer Allstate Insurance Company	Occupation Vice President & Deputy G	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 788.66	

Full Name (Last, First, Middle Initial) C. WILLIAM G CRIMMINS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 218 S KASPAR		Transaction ID: A2006-976662
City State Zip Code ARLINGTON HGTS. IL 60005	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 67.74
Name of Employer Allstate Insurance Company	Occupation Vice President & Deputy G	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 856.40	

SUBTOTAL of Receipts This Page (optional)	▶	155.17
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. FREDERICK F CRIPE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 277 N. BILTMORE DRIVE		Transaction ID: A2006-975296	
City State Zip Code N. BARRINGTON IL 60010		Amount of Each Receipt this Period 76.15	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation GVP-Product Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 889.58	

Full Name (Last, First, Middle Initial) B. FREDERICK F CRIPE		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 277 N. BILTMORE DRIVE		Transaction ID: A2006-976656	
City State Zip Code N. BARRINGTON IL 60010		Amount of Each Receipt this Period 76.15	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation GVP-Product Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 965.73	

Full Name (Last, First, Middle Initial) C. RICHARD C CRIST JR		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 14 CARDINAL DRIVE		Transaction ID: A2006-975197	
City State Zip Code PRINCETON JUNCT NJ 08550		Amount of Each Receipt this Period 65.96	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 788.53	

SUBTOTAL of Receipts This Page (optional) ▶	218.26
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD C CRIST JR		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 14 CARDINAL DRIVE		Transaction ID: A2006-976562	
City State Zip Code PRINCETON JUNCT NJ 08550	Amount of Each Receipt this Period 65.96		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 854.49		

Full Name (Last, First, Middle Initial) B. JOAN M CROCKETT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 27 RIVER BEND CT		Transaction ID: A2006-975270	
City State Zip Code LAKE BARRINGTON IL 60010	Amount of Each Receipt this Period 113.08		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1284.23		

Full Name (Last, First, Middle Initial) C. JOAN M CROCKETT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 27 RIVER BEND CT		Transaction ID: A2006-976632	
City State Zip Code LAKE BARRINGTON IL 60010	Amount of Each Receipt this Period 113.08		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1397.31		

SUBTOTAL of Receipts This Page (optional) ▶	292.12
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM DALY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 22425 N LINDEN DR.		Transaction ID: A2006-975179	
City BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 35.74
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.68		

Full Name (Last, First, Middle Initial) B. WILLIAM DALY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 22425 N LINDEN DR.		Transaction ID: A2006-976546	
City BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 35.74
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 459.42		

Full Name (Last, First, Middle Initial) C. ROBERT W DANIELS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1020 Pleasant Street #1		Transaction ID: A2006-975229	
City Oak Park	State IL	Zip Code 60302	Amount of Each Receipt this Period 27.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.91		

SUBTOTAL of Receipts This Page (optional) ▶	99.36
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT W DANIELS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1020 Pleasant Street #1		Transaction ID: A2006-976593
City State Zip Code Oak Park IL 60302	Amount of Each Receipt this Period 27.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.79	

Full Name (Last, First, Middle Initial) B. SAM DE FRANK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 5 COURT OF HIDDEN WELLS		Transaction ID: A2006-975359
City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 32.02	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP & Tax Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 378.78	

Full Name (Last, First, Middle Initial) C. SAM DE FRANK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 5 COURT OF HIDDEN WELLS		Transaction ID: A2006-976712
City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 32.02	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP & Tax Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.80	

SUBTOTAL of Receipts This Page (optional) ▶	91.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PETER D DEBRECENY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 1512 NORTH HOYNE AVE		Transaction ID: A2006-975284
City State Zip Code CHICAGO IL 60622	Amount of Each Receipt this Period 58.62	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Corporate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 691.54	

Full Name (Last, First, Middle Initial) B. PETER D DEBRECENY		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 1512 NORTH HOYNE AVE		Transaction ID: A2006-976645
City State Zip Code CHICAGO IL 60622	Amount of Each Receipt this Period 58.62	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Corporate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.16	

Full Name (Last, First, Middle Initial) C. RANDAL S DECOURSEY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 6710 BLUE RIDGE LANE		Transaction ID: A2006-975351
City State Zip Code LINCOLN NE 68516	Amount of Each Receipt this Period 27.78	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.11	

SUBTOTAL of Receipts This Page (optional) ▶	145.02
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RANDAL S DECOURSEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 6710 BLUE RIDGE LANE		Transaction ID: A2006-976706	
City State Zip Code LINCOLN NE 68516		Amount of Each Receipt this Period 27.78	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 353.89	

Full Name (Last, First, Middle Initial) B. STEVEN J DEGNAN-SCHMIDT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1320 MULBERRY LN.		Transaction ID: A2006-975275	
City State Zip Code CARY IL 60013		Amount of Each Receipt this Period 34.08	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 402.41	

Full Name (Last, First, Middle Initial) C. STEVEN J DEGNAN-SCHMIDT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1320 MULBERRY LN.		Transaction ID: A2006-976636	
City State Zip Code CARY IL 60013		Amount of Each Receipt this Period 34.08	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 436.49	

SUBTOTAL of Receipts This Page (optional) ▶	95.94
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JEFFREY F DEIGL		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 453 PRAIRIE		Transaction ID: A2006-975469
City ELMHURST	State IL	Zip Code 60126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 49.74
Name of Employer Allstate Insurance Company	Occupation AVP Specialty Lines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 580.29	

Full Name (Last, First, Middle Initial) B. JEFFREY F DEIGL		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 453 PRAIRIE		Transaction ID: A2006-976811
City ELMHURST	State IL	Zip Code 60126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 49.74
Name of Employer Allstate Insurance Company	Occupation AVP Specialty Lines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.03	

Full Name (Last, First, Middle Initial) C. PATRICIA K DENMAN		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 928 BURGESS CIRCLE		Transaction ID: A2006-975333
City BUFFALO GROVE	State IL	Zip Code 60089
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.70
Name of Employer Allstate Insurance Company	Occupation Human Resource Senior Man	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.55	

SUBTOTAL of Receipts This Page (optional)	124.18
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LORI A DESCH

Mailing Address 5 TREGONWELL COURT

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation Claims Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 332.84

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975261

Amount of Each Receipt this Period
29.31

B. Full Name (Last, First, Middle Initial)
LORI A DESCH

Mailing Address 5 TREGONWELL COURT

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation Claims Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 362.15

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976625

Amount of Each Receipt this Period
29.31

C. Full Name (Last, First, Middle Initial)
LEO DISHEL

Mailing Address 340 E 74TH ST APT 6C

City State Zip Code
NEW YORK NY 10021

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 233.67

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975157

Amount of Each Receipt this Period
19.71

SUBTOTAL of Receipts This Page (optional)	▶	78.33
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 62 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LEO DISHEL		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 340 E 74TH ST APT 6C		Transaction ID: A2006-976526	
City State Zip Code NEW YORK NY 10021	Amount of Each Receipt this Period 19.71		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.38		

Full Name (Last, First, Middle Initial) B. MARIE E DIVIRGILIO		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 2063 CHARTER POINT DR		Transaction ID: A2006-975482	
City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 99.57		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 529.13		

Full Name (Last, First, Middle Initial) C. SARAH R DONAHUE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 4147 RFD		Transaction ID: A2006-975445	
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 35.69		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Northbrook/Glenbrook		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.69		

SUBTOTAL of Receipts This Page (optional) ▶	154.97
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SARAH R DONAHUE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 4147 RFD		Transaction ID: A2006-976787	
City LONG GROVE	State IL	Zip Code 60047	Amount of Each Receipt this Period 35.69
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Northbrook/Glenbrook		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 454.38		

Full Name (Last, First, Middle Initial) B. PHILIP J DORN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 12 SAINT JOHN DRIVE		Transaction ID: A2006-975581	
City HAWTHORN WOODS	State IL	Zip Code 60047	Amount of Each Receipt this Period 19.87
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Investor Relations Direct		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.54		

Full Name (Last, First, Middle Initial) C. PHILIP J DORN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 12 SAINT JOHN DRIVE		Transaction ID: A2006-976910	
City HAWTHORN WOODS	State IL	Zip Code 60047	Amount of Each Receipt this Period 19.87
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Investor Relations Direct		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.41		

SUBTOTAL of Receipts This Page (optional)	75.43
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DANIEL C DRESSEL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1706 ADLER LANE		Transaction ID: A2006-975201	
City MALVERN	State PA	Amount of Each Receipt this Period 19.41	
Zip Code 19355			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Field Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.17		

Full Name (Last, First, Middle Initial) B. DANIEL C DRESSEL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1706 ADLER LANE		Transaction ID: A2006-976566	
City MALVERN	State PA	Amount of Each Receipt this Period 19.41	
Zip Code 19355			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Field Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.58		

Full Name (Last, First, Middle Initial) C. JAMES M DUDAS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 109 LORRAINE DRIVE		Transaction ID: A2006-975273	
City LAKE ZURICH	State IL	Amount of Each Receipt this Period 17.49	
Zip Code 60047			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.68		

SUBTOTAL of Receipts This Page (optional) ▶	56.31
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES M DUDAS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 109 LORRAINE DRIVE		Transaction ID: A2006-976634
City LAKE ZURICH	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.49
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.17	

Full Name (Last, First, Middle Initial) B. TIMOTHY R DUGAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 3220 SANDY LANE		Transaction ID: A2006-975569
City GLENVIEW	State IL	Zip Code 60025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.40
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.80	

Full Name (Last, First, Middle Initial) C. TIMOTHY R DUGAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 3220 SANDY LANE		Transaction ID: A2006-976899
City GLENVIEW	State IL	Zip Code 60025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.40
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 369.20	

SUBTOTAL of Receipts This Page (optional)	▶	74.29
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LAURA DUNNE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1810 BALMORAL AVE		Transaction ID: A2006-975428	
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 20.93		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Strategy Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.21		

Full Name (Last, First, Middle Initial) B. LAURA DUNNE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1810 BALMORAL AVE		Transaction ID: A2006-976772	
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 20.93		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Strategy Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.14		

Full Name (Last, First, Middle Initial) C. DANIEL P DURBIN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1311 SOUTH WALNUT AVE.		Transaction ID: A2006-975451	
City State Zip Code ARLINGTON HTS. IL 60005	Amount of Each Receipt this Period 26.63		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AF Operations Dept Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.06		

SUBTOTAL of Receipts This Page (optional) ▶	68.49
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DANIEL P DURBIN

Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60005

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

Name of Employer Allstate Insurance Company Occupation AF Operations Dept Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 341.69

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976793

Amount of Each Receipt this Period
26.63

B. Full Name (Last, First, Middle Initial)
GEOFFREY A DURHAM

Mailing Address 504 ROOSEVELT DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.21

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975579

Amount of Each Receipt this Period
41.36

C. Full Name (Last, First, Middle Initial)
ELIZABETH A EDE

Mailing Address 16 LINDON LANE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.04

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975548

Amount of Each Receipt this Period
45.84

SUBTOTAL of Receipts This Page (optional)	▶	113.83
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN EDELEN		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 1250 So Indiana - Unit 1309		Transaction ID: A2006-975181
City Chicago	State IL	Zip Code 60605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.35
Name of Employer Allstate Insurance Company	Occupation AVP P-CCSO Strategy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 487.10	

Full Name (Last, First, Middle Initial) B. JOHN EDELEN		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 1250 So Indiana - Unit 1309		Transaction ID: A2006-976548
City Chicago	State IL	Zip Code 60605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.35
Name of Employer Allstate Insurance Company	Occupation AVP P-CCSO Strategy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.45	

Full Name (Last, First, Middle Initial) C. NINA B EIDELL		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 25 E. Superior # 11B		Transaction ID: A2006-975126
City CHICAGO	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.06
Name of Employer Allstate Insurance Company	Occupation Vice President Human Reso	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 716.27	

SUBTOTAL of Receipts This Page (optional)	▶	143.76
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 / 263						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. NINA B EIDELL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 25 E. Superior # 11B		Transaction ID: A2006-976497	
City State Zip Code CHICAGO IL 60611	Amount of Each Receipt this Period 61.06		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Human Reso		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 777.33		

Full Name (Last, First, Middle Initial) B. PHILIP L EMMANUELE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1085 FOREST HILL RD.		Transaction ID: A2006-975160	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 58.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Marketing Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 691.02		

Full Name (Last, First, Middle Initial) C. PHILIP L EMMANUELE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1085 FOREST HILL RD.		Transaction ID: A2006-976529	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 58.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Marketing Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 749.27		

SUBTOTAL of Receipts This Page (optional) ▶	177.56
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KATHLEEN N ENRIGHT		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 10323 TRUMBULL AVE		Transaction ID: A2006-975459	
City State Zip Code CHICAGO IL 60655	Amount of Each Receipt this Period 33.61		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.27		

Full Name (Last, First, Middle Initial) B. KATHLEEN N ENRIGHT		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 10323 TRUMBULL AVE		Transaction ID: A2006-976801	
City State Zip Code CHICAGO IL 60655	Amount of Each Receipt this Period 33.61		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 428.88		

Full Name (Last, First, Middle Initial) C. MICHAEL L ESCOBAR		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 660 BALMORAL LANE		Transaction ID: A2006-975139	
City State Zip Code INVERNESS IL 60067	Amount of Each Receipt this Period 48.44		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Finance Innovation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.15		

SUBTOTAL of Receipts This Page (optional) ▶	115.66
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 71 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL L ESCOBAR		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 660 BALMORAL LANE		Transaction ID: A2006-976509
City State Zip Code INVERNESS IL 60067	Amount of Each Receipt this Period 48.44	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Finance Innovation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 618.59	

Full Name (Last, First, Middle Initial) B. RICHARD B ESPINOZA		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 673 HASTINGS ROAD		Transaction ID: A2006-975379
City State Zip Code WHEELING IL 60090	Amount of Each Receipt this Period 29.83	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Unclassified Sr Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.51	

Full Name (Last, First, Middle Initial) C. RICHARD B ESPINOZA		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 673 HASTINGS ROAD		Transaction ID: A2006-976727
City State Zip Code WHEELING IL 60090	Amount of Each Receipt this Period 29.83	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Unclassified Sr Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 382.34	

SUBTOTAL of Receipts This Page (optional) ▶	108.10
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City BARRINGTON State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 474.79

Date of Receipt
06 / 09 / 2006

Transaction ID: A2006-975177

Amount of Each Receipt this Period
40.47

B. Full Name (Last, First, Middle Initial)
THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City BARRINGTON State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 515.26

Date of Receipt
06 / 23 / 2006

Transaction ID: A2006-976544

Amount of Each Receipt this Period
40.47

C. Full Name (Last, First, Middle Initial)
DOROTHY EVEN

Mailing Address 1130 KEYSTONE AVENUE

City RIVER FOREST State IL Zip Code 60305

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

Name of Employer Allstate Insurance Company Occupation Senior Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 925.49

Date of Receipt
06 / 09 / 2006

Transaction ID: A2006-975345

Amount of Each Receipt this Period
78.81

SUBTOTAL of Receipts This Page (optional)	▶	159.75
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DOROTHY EVEN

Mailing Address 1130 KEYSTONE AVENUE

City State Zip Code
RIVER FOREST IL 60305

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

Name of Employer Allstate Insurance Company Occupation Senior Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1004.30

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976701

Amount of Each Receipt this Period
78.81

B. Full Name (Last, First, Middle Initial)
LAURA A FABREGUE

Mailing Address 1000 HAMAN WAY

City State Zip Code
ROSEVILLE CA 95678

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 282.05

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975200

Amount of Each Receipt this Period
28.43

C. Full Name (Last, First, Middle Initial)
LAURA A FABREGUE

Mailing Address 1000 HAMAN WAY

City State Zip Code
ROSEVILLE CA 95678

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.48

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976565

Amount of Each Receipt this Period
28.43

SUBTOTAL of Receipts This Page (optional)	▶	135.67
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 74 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KATHRYN L FABYAN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 21209 WEST YORKSHIRE DRIVE		Transaction ID: A2006-975515	
City State Zip Code KILDEER IL 60049	Amount of Each Receipt this Period 36.39		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 429.68		

Full Name (Last, First, Middle Initial) B. KATHRYN L FABYAN		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 21209 WEST YORKSHIRE DRIVE		Transaction ID: A2006-976847	
City State Zip Code KILDEER IL 60049	Amount of Each Receipt this Period 36.39		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 466.07		

Full Name (Last, First, Middle Initial) C. GORDON S FALKNOR		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 703 E CHERRY LN		Transaction ID: A2006-975374	
City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 44.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 519.25		

SUBTOTAL of Receipts This Page (optional) ▶	117.13
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GORDON S FALKNOR

Mailing Address 703 E CHERRY LN

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel &

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 563.60

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976724

Amount of Each Receipt this Period
44.35

B. Full Name (Last, First, Middle Initial)
JOHN A FARRUGIA

Mailing Address 926 WILSHIRE DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Claims Reserve Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.36

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975208

Amount of Each Receipt this Period
6.22

C. Full Name (Last, First, Middle Initial)
CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation Senior Regional Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 293.08

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975485

Amount of Each Receipt this Period
24.74

SUBTOTAL of Receipts This Page (optional)	▶	75.31
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CAROLYN A FILIPOVIC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 918 JUNIPER ROAD		Transaction ID: A2006-976823	
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 24.74		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Regional Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.82		

Full Name (Last, First, Middle Initial) B. STEVEN FINE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 40375 N. SEA EAGLE CT		Transaction ID: A2006-975185	
City State Zip Code ANTIOCH IL 60002	Amount of Each Receipt this Period 23.91		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.04		

Full Name (Last, First, Middle Initial) C. STEVEN FINE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 40375 N. SEA EAGLE CT		Transaction ID: A2006-976551	
City State Zip Code ANTIOCH IL 60002	Amount of Each Receipt this Period 23.91		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.95		

SUBTOTAL of Receipts This Page (optional) ▶	72.56
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DARYLL D FLETCHER		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 22256 W MASHI CT		Transaction ID: A2006-975337	
City IVANHOE	State IL	Amount of Each Receipt this Period 26.87	
Zip Code 60060		Amount of Each Receipt this Period 26.87	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.87	
Name of Employer Allstate Insurance Company	Occupation VP-KNOWLEDGE DEVELOPMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.48		

Full Name (Last, First, Middle Initial) B. DARYLL D FLETCHER		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 22256 W MASHI CT		Transaction ID: A2006-976693	
City IVANHOE	State IL	Amount of Each Receipt this Period 26.87	
Zip Code 60060		Amount of Each Receipt this Period 26.87	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.87	
Name of Employer Allstate Insurance Company	Occupation VP-KNOWLEDGE DEVELOPMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.35		

Full Name (Last, First, Middle Initial) C. BARBARA J FLOWERS		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1105 W CAMPBELL ST		Transaction ID: A2006-976649	
City ARLINGTON HTS	State IL	Amount of Each Receipt this Period 16.42	
Zip Code 60005		Amount of Each Receipt this Period 16.42	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.42	
Name of Employer Allstate Insurance Company	Occupation Personal Lines Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.31		

SUBTOTAL of Receipts This Page (optional) ▶	70.16
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KELLY F FOGARTY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 613 REX		Transaction ID: A2006-975367	
City ELMHURST	State IL	Amount of Each Receipt this Period 35.65	
Zip Code 60126		Amount of Each Receipt this Period 35.65	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.65	
Name of Employer Allstate Insurance Company	Occupation AVP Specialty Lines	Amount of Each Receipt this Period 35.65	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.59	Amount of Each Receipt this Period 35.65	

Full Name (Last, First, Middle Initial) B. KELLY F FOGARTY		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 613 REX		Transaction ID: A2006-976719	
City ELMHURST	State IL	Amount of Each Receipt this Period 35.65	
Zip Code 60126		Amount of Each Receipt this Period 35.65	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.65	
Name of Employer Allstate Insurance Company	Occupation AVP Specialty Lines	Amount of Each Receipt this Period 35.65	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.24	Amount of Each Receipt this Period 35.65	

Full Name (Last, First, Middle Initial) C. DAWN H FRASE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 24076 N. SHAGBARK		Transaction ID: A2006-975444	
City LAKE ZURICH	State IL	Amount of Each Receipt this Period 17.89	
Zip Code 60047		Amount of Each Receipt this Period 17.89	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.89	
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	Amount of Each Receipt this Period 17.89	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.23	Amount of Each Receipt this Period 17.89	

SUBTOTAL of Receipts This Page (optional) ▶	89.19
TOTAL This Period (last page this line number only) ▶	89.19

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DAWN H FRASE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 24076 N. SHAGBARK		Transaction ID: A2006-976786
City LAKE ZURICH	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.89
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.12	

Full Name (Last, First, Middle Initial) B. PATRICIA W FRIDLEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 945 Shermer Road		Transaction ID: A2006-975279
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 72.00
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.38	

Full Name (Last, First, Middle Initial) C. PATRICIA W FRIDLEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 945 Shermer Road		Transaction ID: A2006-976640
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 72.00
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 847.38	

SUBTOTAL of Receipts This Page (optional)	161.89
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER

Mailing Address 350 EDGE FIELD LANE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.04

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975278

Amount of Each Receipt this Period
39.77

B. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER

Mailing Address 350 EDGE FIELD LANE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 509.81

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976639

Amount of Each Receipt this Period
39.77

C. Full Name (Last, First, Middle Initial)
JOHN C FUREY

Mailing Address 1303 Glencoe Avenue

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 203.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975163

Amount of Each Receipt this Period
23.26

SUBTOTAL of Receipts This Page (optional)	▶	102.80
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. VINCENT A FUSCO		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 6 SUGAR MAPLE COURT		Transaction ID: A2006-975137	
City State Zip Code DIX HILLS NY 11746	Amount of Each Receipt this Period 21.38		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.62		

Full Name (Last, First, Middle Initial) B. ANGELA FUSCO		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 22255 MASHIE CT		Transaction ID: A2006-975199	
City State Zip Code IVANHOE IL 60060	Amount of Each Receipt this Period 24.86		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.12		

Full Name (Last, First, Middle Initial) C. VINCENT A FUSCO		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 6 SUGAR MAPLE COURT		Transaction ID: A2006-976507	
City State Zip Code DIX HILLS NY 11746	Amount of Each Receipt this Period 21.38		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.00		

SUBTOTAL of Receipts This Page (optional) ▶	67.62
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 82 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANGELA FUSCO		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 22255 MASHIE CT		Transaction ID: A2006-976564
City IVANHOE	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.99
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.11	

Full Name (Last, First, Middle Initial) B. DOUGLAS F GAER		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 5610 SOUTH 88th STREET		Transaction ID: A2006-975555
City LINCOLN	State NE	Zip Code 68526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.30
Name of Employer Allstate Insurance Company	Occupation AVP Nebraska Service Center	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.60	

Full Name (Last, First, Middle Initial) C. DOUGLAS F GAER		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 5610 SOUTH 88th STREET		Transaction ID: A2006-976885
City LINCOLN	State NE	Zip Code 68526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.30
Name of Employer Allstate Insurance Company	Occupation AVP Nebraska Service Center	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.90	

SUBTOTAL of Receipts This Page (optional)	▶	70.59
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 83 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PATRICK C GALLERY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 2321 WEST STEEPLECHASE		Transaction ID: A2006-975204
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 56.49	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President & Assistan	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 661.71	

Full Name (Last, First, Middle Initial) B. PATRICK C GALLERY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2321 WEST STEEPLECHASE		Transaction ID: A2006-976569
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 56.49	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President & Assistan	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 718.20	

Full Name (Last, First, Middle Initial) C. KAREN C GARDNER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1434 BAFFIN ROAD		Transaction ID: A2006-975553
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 65.75	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.12	

SUBTOTAL of Receipts This Page (optional) ▶	178.73
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KAREN C GARDNER		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1434 BAFFIN ROAD		Transaction ID: A2006-976883	
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 65.75		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Tax		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 834.87		

Full Name (Last, First, Middle Initial) B. JOSEPH E GARNETT		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 507 OLD WALNUT CIRCLE		Transaction ID: A2006-975143	
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 18.42		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Bank Cash Management Dir		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.94		

Full Name (Last, First, Middle Initial) C. JOSEPH E GARNETT		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 507 OLD WALNUT CIRCLE		Transaction ID: A2006-976513	
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 18.42		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Bank Cash Management Dir		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.36		

SUBTOTAL of Receipts This Page (optional) ▶	102.59
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LYNN A GEHANT		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 23W650 WOODWORTH PLACE		Transaction ID: A2006-975380 Amount of Each Receipt this Period 34.85
City ROSELLE	State IL Zip Code 60172	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.75	

Full Name (Last, First, Middle Initial) B. LYNN A GEHANT		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 23W650 WOODWORTH PLACE		Transaction ID: A2006-976728 Amount of Each Receipt this Period 34.85
City ROSELLE	State IL Zip Code 60172	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.60	

Full Name (Last, First, Middle Initial) C. BONNIE S GILL		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 1570 EDGEFIELD LANE		Transaction ID: A2006-975554 Amount of Each Receipt this Period 29.45
City HOFFMAN ESTATES	State IL Zip Code 60195	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP State Team	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.49	

SUBTOTAL of Receipts This Page (optional) ▶	99.15
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BONNIE S GILL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1570 EDGEFIELD LANE		Transaction ID: A2006-976884
City State Zip Code HOFFMAN ESTATES IL 60195	Amount of Each Receipt this Period 29.45	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP State Team	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 354.94	

Full Name (Last, First, Middle Initial) B. JOAN GILMORE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 656 S BUCKINGHAM CT		Transaction ID: A2006-975140
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 39.77	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.81	

Full Name (Last, First, Middle Initial) C. JOAN GILMORE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 656 S BUCKINGHAM CT		Transaction ID: A2006-976510
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 39.77	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 568.58	

SUBTOTAL of Receipts This Page (optional) ▶	108.99
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DEBORAH C GIVENS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 4370 MILNER ROAD WEST		Transaction ID: A2006-975522
City State Zip Code BIRMINGHAM AL 35242	Amount of Each Receipt this Period 41.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 371.88	

Full Name (Last, First, Middle Initial) B. DEBORAH C GIVENS		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 4370 MILNER ROAD WEST		Transaction ID: A2006-976854
City State Zip Code BIRMINGHAM AL 35242	Amount of Each Receipt this Period 41.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 413.38	

Full Name (Last, First, Middle Initial) C. MARLA F GLABE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 83 CARIBOU CROSSING		Transaction ID: A2006-975422
City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 68.34	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 804.05	

SUBTOTAL of Receipts This Page (optional) ▶	151.34
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 88 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARLA F GLABE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 83 CARIBOU CROSSING		Transaction ID: A2006-976766
City NORTHBROOK State IL Zip Code 60062	Amount of Each Receipt this Period 68.34	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation Vice President Operations	Aggregate Year-to-Date ▼ 872.39	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ROBERT J GLOD		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1016 N. DERBYSHIRE		Transaction ID: A2006-975344
City ARLINGTON HTS State IL Zip Code 60004	Amount of Each Receipt this Period 18.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation Operations Director	Aggregate Year-to-Date ▼ 216.65	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ROBERT J GLOD		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1016 N. DERBYSHIRE		Transaction ID: A2006-976700
City ARLINGTON HTS State IL Zip Code 60004	Amount of Each Receipt this Period 18.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation Operations Director	Aggregate Year-to-Date ▼ 235.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	105.04
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM T GOFF		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 124 FLEETS COVE ROAD		Transaction ID: A2006-975141	
City State Zip Code HUNTINGTON NY 11743	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Product Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.19		

Full Name (Last, First, Middle Initial) B. WILLIAM T GOFF		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 124 FLEETS COVE ROAD		Transaction ID: A2006-976511	
City State Zip Code HUNTINGTON NY 11743	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Product Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.54		

Full Name (Last, First, Middle Initial) C. BARBARA H GOHR		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1601 OLD BARN CIRCLE		Transaction ID: A2006-975259	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 25.98		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Administrative Ops		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.19		

SUBTOTAL of Receipts This Page (optional) ▶	58.68
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BARBARA H GOHR		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1601 OLD BARN CIRCLE		Transaction ID: A2006-976623
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 25.98	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Administrative Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.17	

Full Name (Last, First, Middle Initial) B. BRUCE R GOLDBERG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 10 MULBERRY LN		Transaction ID: A2006-975328
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.39	

Full Name (Last, First, Middle Initial) C. BRUCE R GOLDBERG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 10 MULBERRY LN		Transaction ID: A2006-976685
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.27	

SUBTOTAL of Receipts This Page (optional) ▶	65.74
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANN A GOULD		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 4071 NEWPORT LANE		Transaction ID: A2006-975612
City ARLINGTON HTS	State IL	Zip Code 60004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.47
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 359.34	

Full Name (Last, First, Middle Initial) B. ANN A GOULD		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 4071 NEWPORT LANE		Transaction ID: A2006-976941
City ARLINGTON HTS	State IL	Zip Code 60004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.47
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.81	

Full Name (Last, First, Middle Initial) C. KEVIN P GOW		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 4 HAMPTON LANE		Transaction ID: A2006-975122
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.35
Name of Employer Allstate Insurance Company	Occupation VP AGENCY & CUSTOMER SUPP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.23	

SUBTOTAL of Receipts This Page (optional)	▶	86.29
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KEVIN P GOW		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 4 HAMPTON LANE		Transaction ID: A2006-976493	
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 25.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation VP AGENCY & CUSTOMER SUPP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.58		

Full Name (Last, First, Middle Initial) B. GEORGE F GRAWE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 18799 GUNN HIGHWAY		Transaction ID: A2006-975256	
City State Zip Code ODESSA FL 33556	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.16		

Full Name (Last, First, Middle Initial) C. GEORGE F GRAWE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 18799 GUNN HIGHWAY		Transaction ID: A2006-976620	
City State Zip Code ODESSA FL 33556	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.04		

SUBTOTAL of Receipts This Page (optional) ▶	65.11
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAMELA P GRAY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 50 E. BELLEVUE PL. #2402		Transaction ID: A2006-97529	
City CHICAGO	State IL	Amount of Each Receipt this Period 24.24	
Zip Code 60611		Amount of Each Receipt this Period 24.24	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Data Center Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.38		

Full Name (Last, First, Middle Initial) B. PAMELA P GRAY		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 50 E. BELLEVUE PL. #2402		Transaction ID: A2006-976860	
City CHICAGO	State IL	Amount of Each Receipt this Period 24.24	
Zip Code 60611		Amount of Each Receipt this Period 24.24	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Data Center Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.62		

Full Name (Last, First, Middle Initial) C. JUDITH P GREFFIN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 948 NORTH EUCLID AVENUE		Transaction ID: A2006-975283	
City OAK PARK	State IL	Amount of Each Receipt this Period 37.96	
Zip Code 60302		Amount of Each Receipt this Period 37.96	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.25		

SUBTOTAL of Receipts This Page (optional) ▶	86.44
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JUDITH P GREFFIN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 948 NORTH EUCLID AVENUE		Transaction ID: A2006-976644	
City State Zip Code OAK PARK IL 60302	Amount of Each Receipt this Period 37.96		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 482.21		

Full Name (Last, First, Middle Initial) B. MARK A GRELLA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1210 HADLEIGH DRIVE		Transaction ID: A2006-975173	
City State Zip Code WEST CHESTER PA 19380	Amount of Each Receipt this Period 46.28		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 552.14		

Full Name (Last, First, Middle Initial) C. MARK A GRELLA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1210 HADLEIGH DRIVE		Transaction ID: A2006-976540	
City State Zip Code WEST CHESTER PA 19380	Amount of Each Receipt this Period 46.28		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 598.42		

SUBTOTAL of Receipts This Page (optional) ▶	130.52
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 95 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. GREGORY J GUIDOS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 804 QUEENS HARBOR BLVD		Transaction ID: A2006-975483	
City JACKSONVILLE	State FL	Zip Code 32225	Amount of Each Receipt this Period 21.04
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Finance AFW		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.15		

Full Name (Last, First, Middle Initial) B. GREGORY J GUIDOS		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 804 QUEENS HARBOR BLVD		Transaction ID: A2006-976822	
City JACKSONVILLE	State FL	Zip Code 32225	Amount of Each Receipt this Period 21.04
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Finance AFW		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.19		

Full Name (Last, First, Middle Initial) C. JOHN F HAAS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 6509 E. BETTY ELYSE LANE		Transaction ID: A2006-975585	
City SCOTTSDALE	State AZ	Zip Code 85254	Amount of Each Receipt this Period 18.00
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.15		

SUBTOTAL of Receipts This Page (optional) ▶	60.08
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 96 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN F HAAS		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 6509 E. BETTY ELYSE LANE		Transaction ID: A2006-976914
City State Zip Code SCOTTSDALE AZ 85254	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 18.00
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.15	

Full Name (Last, First, Middle Initial) B. KIRK HAGGARD		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 6608 OCASO DRIVE		Transaction ID: A2006-975608
City State Zip Code CASTLE ROCK CO 80108	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 26.04
Name of Employer Allstate Insurance Company	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.08	

Full Name (Last, First, Middle Initial) C. KIRK HAGGARD		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 6608 OCASO DRIVE		Transaction ID: A2006-976937
City State Zip Code CASTLE ROCK CO 80108	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 26.04
Name of Employer Allstate Insurance Company	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.12	

SUBTOTAL of Receipts This Page (optional)	70.08
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES W HAIDU		Date of Receipt M M / D D / Y Y Y Y Y 06 / 09 / 2006
Mailing Address 65 HILLBURN LN		Transaction ID: A2006-975432
City N. BARRINGTON	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.61
Name of Employer Allstate Insurance Company	Occupation Ivantage AVP Specialty Li	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.21	

Full Name (Last, First, Middle Initial) B. JAMES W HAIDU		Date of Receipt M M / D D / Y Y Y Y Y 06 / 23 / 2006
Mailing Address 65 HILLBURN LN		Transaction ID: A2006-976776
City N. BARRINGTON	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.61
Name of Employer Allstate Insurance Company	Occupation Ivantage AVP Specialty Li	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 645.82	

Full Name (Last, First, Middle Initial) C. ROBERT F HAIR		Date of Receipt M M / D D / Y Y Y Y Y 06 / 09 / 2006
Mailing Address 17 NORTH TRAIL		Transaction ID: A2006-975613
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.96
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.47	

SUBTOTAL of Receipts This Page (optional)	▶	126.18
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT F HAIR

Mailing Address 17 NORTH TRAIL

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 321.43

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976942

Amount of Each Receipt this Period
24.96

B. Full Name (Last, First, Middle Initial)
DANNY L HALE

Mailing Address 1071 OLMSTED DRIVE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation SVP Chf Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1590.03

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975513

Amount of Each Receipt this Period
135.46

C. Full Name (Last, First, Middle Initial)
DANNY L HALE

Mailing Address 1071 OLMSTED DRIVE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation SVP Chf Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1725.49

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976846

Amount of Each Receipt this Period
135.46

SUBTOTAL of Receipts This Page (optional)	▶	295.88
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT HALPERN-GIVENS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 3001 SUTTON WOODS CT		Transaction ID: A2006-975458
City State Zip Code CRYSTAL LAKE IL 60012	Amount of Each Receipt this Period 17.19	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Human Resource Senior Man	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.28	

Full Name (Last, First, Middle Initial) B. ROBERT HALPERN-GIVENS		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 3001 SUTTON WOODS CT		Transaction ID: A2006-976800
City State Zip Code CRYSTAL LAKE IL 60012	Amount of Each Receipt this Period 17.19	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Human Resource Senior Man	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.47	

Full Name (Last, First, Middle Initial) C. RANDALL M HANSON		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 840 ALLEGHANY		Transaction ID: A2006-975563
City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 29.74	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.13	

SUBTOTAL of Receipts This Page (optional) ▶	64.12
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RANDALL M HANSON		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 840 ALLEGHANY		Transaction ID: A2006-976893	
City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 29.74		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.87		

Full Name (Last, First, Middle Initial) B. HERBERT L HARRIS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1812 SOUTHVIEW CIRCLE		Transaction ID: A2006-975523	
City State Zip Code BIRMINGHAM AL 35244	Amount of Each Receipt this Period 28.43		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.41		

Full Name (Last, First, Middle Initial) C. HERBERT L HARRIS		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1812 SOUTHVIEW CIRCLE		Transaction ID: A2006-976855	
City State Zip Code BIRMINGHAM AL 35244	Amount of Each Receipt this Period 28.43		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.84		

SUBTOTAL of Receipts This Page (optional) ▶	86.60
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 101 / 263						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL L HARRISON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1141 WINNERS CIRCLE		Transaction ID: A2006-975622	
City State Zip Code LIBERTYVILLE IL 60048		Amount of Each Receipt this Period 132.55	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1586.30	

Full Name (Last, First, Middle Initial) B. MICHAEL L HARRISON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1141 WINNERS CIRCLE		Transaction ID: A2006-976947	
City State Zip Code LIBERTYVILLE IL 60048		Amount of Each Receipt this Period 132.55	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1718.85	

Full Name (Last, First, Middle Initial) C. FREDRICH A HATCH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 8313 STRATHMORE LANE		Transaction ID: A2006-976911	
City State Zip Code ROANOKE VA 24019		Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Territory Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 212.55	

SUBTOTAL of Receipts This Page (optional) ▶	281.45
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 102 / 263						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DANIEL J HEBEL		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 28365 West Big Hollow Road		Transaction ID: A2006-975274	
City State Zip Code Ingleside IL 60041	Amount of Each Receipt this Period 62.70		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 735.53		

Full Name (Last, First, Middle Initial) B. DANIEL J HEBEL		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 28365 West Big Hollow Road		Transaction ID: A2006-976635	
City State Zip Code Ingleside IL 60041	Amount of Each Receipt this Period 62.70		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 798.23		

Full Name (Last, First, Middle Initial) C. RICHARD J HENEBERRY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 23 CLAYTON		Transaction ID: A2006-975307	
City State Zip Code LAKE VILLA IL 60046	Amount of Each Receipt this Period 23.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Intract Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.53		

SUBTOTAL of Receipts This Page (optional) ▶	148.63
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD J HENEBERRY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 23 CLAYTON		Transaction ID: A2006-976666	
City State Zip Code LAKE VILLA IL 60046	Amount of Each Receipt this Period 23.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Intract Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.76		

Full Name (Last, First, Middle Initial) B. ROBERT L HERRING		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 4337 SPRUCE BOUGH DR		Transaction ID: A2006-975519	
City State Zip Code MARIETTA GA 30062	Amount of Each Receipt this Period 28.42		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.89		

Full Name (Last, First, Middle Initial) C. ROBERT L HERRING		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 4337 SPRUCE BOUGH DR		Transaction ID: A2006-976851	
City State Zip Code MARIETTA GA 30062	Amount of Each Receipt this Period 28.42		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.31		

SUBTOTAL of Receipts This Page (optional) ▶	80.07
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 104 / 263						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. GEORGE A HIDES		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 3211 ROYAL WOODS DRIVE		Transaction ID: A2006-975326	
City State Zip Code CRYSTAL LAKE IL 60014	Amount of Each Receipt this Period 5.57		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.84		

Full Name (Last, First, Middle Initial) B. WILLIAM G HILL		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 2935 GLENARYE DRIVE		Transaction ID: A2006-975228	
City State Zip Code LINDENHURST IL 60046	Amount of Each Receipt this Period 77.28		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Product		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 729.62		

Full Name (Last, First, Middle Initial) C. WILLIAM G HILL		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 2935 GLENARYE DRIVE		Transaction ID: A2006-976592	
City State Zip Code LINDENHURST IL 60046	Amount of Each Receipt this Period 77.28		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Product		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 806.90		

SUBTOTAL of Receipts This Page (optional) ▶	160.13
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 105 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SHERYL L HODGES		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 2510 OAK AVENUE		Transaction ID: A2006-975410
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 15.00
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.65	

Full Name (Last, First, Middle Initial) B. SHERYL L HODGES		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 2510 OAK AVENUE		Transaction ID: A2006-976756
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 15.00
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.65	

Full Name (Last, First, Middle Initial) C. MERRILD A HOOVER		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 49 DORAL STREET		Transaction ID: A2006-975233
City HURRICANE	State WV	Zip Code 25526
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 22.46
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.52	

SUBTOTAL of Receipts This Page (optional)	▶	52.46
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MERRILD A HOOVER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 49 DORAL STREET		Transaction ID: A2006-976597
City State Zip Code HURRICANE WV 25526	Amount of Each Receipt this Period 22.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.98	

Full Name (Last, First, Middle Initial) B. DAVID W HORMEL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 179 SHEFFIELD LANE		Transaction ID: A2006-975320
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 21.93	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Unclassified Management B	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.45	

Full Name (Last, First, Middle Initial) C. MARY L HUBER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1532 NORTH BELMONT AVE.		Transaction ID: A2006-975510
City State Zip Code ARLINGTON HTS. IL 60004	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.01	

SUBTOTAL of Receipts This Page (optional) ▶	64.27
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 107 / 263						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARY L HUBER		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 1532 NORTH BELMONT AVE.		Transaction ID: A2006-976843
City ARLINGTON HTS.	State IL	Zip Code 60004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.89	

Full Name (Last, First, Middle Initial) B. JOHN J HUSTED		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 11 RUTGERS COURT		Transaction ID: A2006-975135
City HAWTHORNE WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.26
Name of Employer Allstate Insurance Company	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 459.72	

Full Name (Last, First, Middle Initial) C. DEBORAH R HUTSON		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 1433 Kingsmill Court		Transaction ID: A2006-975187
City Coppell	State TX	Zip Code 75019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.96
Name of Employer Allstate Insurance Company	Occupation Procurement Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.84	

SUBTOTAL of Receipts This Page (optional)	▶	50.10
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 108 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. STEPHEN L IHM		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 21558 W GOLDFINCH CT		Transaction ID: A2006-975407	
City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 39.77		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.03		

Full Name (Last, First, Middle Initial) B. STEPHEN L IHM		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 21558 W GOLDFINCH CT		Transaction ID: A2006-976753	
City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 39.77		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 523.80		

Full Name (Last, First, Middle Initial) C. ROBERT J IHMELS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 3947 HIDDEN HILL CT		Transaction ID: A2006-975145	
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 13.67		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.47		

SUBTOTAL of Receipts This Page (optional) ▶	93.21
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JEFFREY R ILL

Mailing Address 2775 SANDERS RD STE F5

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.05

Date of Receipt
06 / 09 / 2006

Transaction ID: A2006-975375

Amount of Each Receipt this Period
25.22

B. Full Name (Last, First, Middle Initial)
KENNETH A IRVIN

Mailing Address 6352 CRAGIE HILL CT

City DUBLIN State OH Zip Code 43017

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

Name of Employer Allstate Insurance Company Occupation Regional Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.50

Date of Receipt
06 / 23 / 2006

Transaction ID: A2006-976570

Amount of Each Receipt this Period
15.50

C. Full Name (Last, First, Middle Initial)
LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City CARY State IL Zip Code 60013

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

Name of Employer Allstate Insurance Company Occupation Senior Sourcing Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.84

Date of Receipt
06 / 09 / 2006

Transaction ID: A2006-975358

Amount of Each Receipt this Period
26.27

SUBTOTAL of Receipts This Page (optional)	▶	66.99
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 110 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LYNNE A IVERSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 890 BLAZING STAR TRAIL		Transaction ID: A2006-976711	
City State Zip Code CARY IL 60013	Amount of Each Receipt this Period 26.27		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sourcing Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.11		

Full Name (Last, First, Middle Initial) B. BOB A JACKSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 226 Maison Court		Transaction ID: A2006-975572	
City State Zip Code Altamonte Springs FL 32714	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.56		

Full Name (Last, First, Middle Initial) C. BOB A JACKSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 226 Maison Court		Transaction ID: A2006-976902	
City State Zip Code Altamonte Springs FL 32714	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.44		

SUBTOTAL of Receipts This Page (optional) ▶	66.03
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 111 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES C JAMIESON		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-975321
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.52
Name of Employer Allstate Insurance Company	Occupation F&P/Enterprise Risk Manag	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.99	

Full Name (Last, First, Middle Initial) B. JAMES C JAMIESON		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-976679
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.52
Name of Employer Allstate Insurance Company	Occupation F&P/Enterprise Risk Manag	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.51	

Full Name (Last, First, Middle Initial) C. LARRY D JOHNSON		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 21943 W VERNON RIDGE DRIVE		Transaction ID: A2006-975300
City MUNDELEIN	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 51.96
Name of Employer Allstate Insurance Company	Occupation AVP Catastrophe Managemen	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 616.38	

SUBTOTAL of Receipts This Page (optional)	113.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LARRY D JOHNSON

Mailing Address 21943 W VERNON RIDGE DRIVE

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Allstate Insurance Company Occupation AVP Catastrophe Managemen

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 668.34

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976660

Amount of Each Receipt this Period
51.96

B. Full Name (Last, First, Middle Initial)
DOLORES M JOSSUND

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
CHICAGO IL 60646

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.99

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975395

Amount of Each Receipt this Period
39.77

C. Full Name (Last, First, Middle Initial)
DOLORES M JOSSUND

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
CHICAGO IL 60646

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 530.76

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976741

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional)	▶	131.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 113 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN A KANE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1 LONGLEY PLACE		Transaction ID: A2006-976515
City State Zip Code HUNTINGTON STA NY 11746	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 16.31
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.03	

Full Name (Last, First, Middle Initial) B. JEFF L KAUFMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 5271 SERENE VIEW WAY		Transaction ID: A2006-975577
City State Zip Code PARKER CO 80134	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 74.64
Name of Employer Allstate Insurance Company	Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 885.46	

Full Name (Last, First, Middle Initial) C. JEFF L KAUFMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 5271 SERENE VIEW WAY		Transaction ID: A2006-976907
City State Zip Code PARKER CO 80134	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 74.64
Name of Employer Allstate Insurance Company	Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.10	

SUBTOTAL of Receipts This Page (optional)	165.59
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARY KEITH		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 2309 RFD		Transaction ID: A2006-976936	
City LONG GROVE	State IL	Amount of Each Receipt this Period 16.60	
Zip Code 60047			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Finance Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.40		

Full Name (Last, First, Middle Initial) B. TERRY KELAHER		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 924 W. CHESTERFIELD CT.		Transaction ID: A2006-975404	
City PALATINE	State IL	Amount of Each Receipt this Period 78.13	
Zip Code 60067			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President & General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 923.70		

Full Name (Last, First, Middle Initial) C. TERRY KELAHER		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 924 W. CHESTERFIELD CT.		Transaction ID: A2006-976750	
City PALATINE	State IL	Amount of Each Receipt this Period 78.13	
Zip Code 60067			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President & General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.83		

SUBTOTAL of Receipts This Page (optional) ▶	172.86
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DAVID E KENNEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 622 SEDGWICK DR.		Transaction ID: A2006-975433	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 19.43
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.86		

Full Name (Last, First, Middle Initial) B. DAVID E KENNEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 622 SEDGWICK DR.		Transaction ID: A2006-976777	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 19.43
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.29		

Full Name (Last, First, Middle Initial) C. CHRISTOPHER R KIAH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1975 ROSE TERRACE		Transaction ID: A2006-975123	
City RIVERWOODS	State IL	Zip Code 60015	Amount of Each Receipt this Period 39.76
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 473.87		

SUBTOTAL of Receipts This Page (optional) ▶	78.62
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 116 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER R KIAH

Mailing Address 1975 ROSE TERRACE

City State Zip Code
RIVERWOODS IL 60015

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 513.63

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976494

Amount of Each Receipt this Period
39.76

B. Full Name (Last, First, Middle Initial)
CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 411.78

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975324

Amount of Each Receipt this Period
35.14

C. Full Name (Last, First, Middle Initial)
CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 446.92

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976682

Amount of Each Receipt this Period
35.14

SUBTOTAL of Receipts This Page (optional)	110.04
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAUL N KIERIG		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 200 OXFORD RD		Transaction ID: A2006-975389	
City State Zip Code Tower Lakes IL 60010	Amount of Each Receipt this Period 24.01		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.83		

Full Name (Last, First, Middle Initial) B. PAUL N KIERIG		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 200 OXFORD RD		Transaction ID: A2006-976735	
City State Zip Code Tower Lakes IL 60010	Amount of Each Receipt this Period 24.01		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.84		

Full Name (Last, First, Middle Initial) C. BARBARA L KILROY		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1036 VINEYARD DRIVE		Transaction ID: A2006-976579	
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 16.67		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Audit Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.26		

SUBTOTAL of Receipts This Page (optional) ▶	64.69
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES P KING		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 592 TURNER AVENUE		Transaction ID: A2006-975463
City GLEN ELLYN	State IL	Zip Code 60137
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.45
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 407.60	

Full Name (Last, First, Middle Initial) B. JAMES P KING		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 592 TURNER AVENUE		Transaction ID: A2006-976805
City GLEN ELLYN	State IL	Zip Code 60137
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.45
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 442.05	

Full Name (Last, First, Middle Initial) C. LAURA S KISTNER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 22047 W. PETOSKEY CT		Transaction ID: A2006-976867
City PLAINFIELD	State IL	Zip Code 60544
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.69
Name of Employer Allstate Insurance Company	Occupation Frontline Performance Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.97	

SUBTOTAL of Receipts This Page (optional)	▶	84.59
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 / 263		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KEITH A KNAPP		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 175 Macarthur Dr #3712		Transaction ID: A2006-975290	
City Willowbrook	State IL	Zip Code 60527	Amount of Each Receipt this Period 17.06
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Director DSN & CONST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.62		

Full Name (Last, First, Middle Initial) B. KEITH A KNAPP		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 175 Macarthur Dr #3712		Transaction ID: A2006-976651	
City Willowbrook	State IL	Zip Code 60527	Amount of Each Receipt this Period 17.06
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Director DSN & CONST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.68		

Full Name (Last, First, Middle Initial) C. MARY G KNIPP		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 2050 GLENDALE AVENUE		Transaction ID: A2006-975312	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 19.66
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Allstate Financial Market		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.07		

SUBTOTAL of Receipts This Page (optional) ▶	53.78
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JEFFREY D KNIPP		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 2050 GLENDALE AVE		Transaction ID: A2006-975560
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.66
Name of Employer Allstate Insurance Company	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 314.77	

Full Name (Last, First, Middle Initial) B. MARY G KNIPP		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2050 GLENDALE AVENUE		Transaction ID: A2006-976671
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.66
Name of Employer Allstate Insurance Company	Occupation Allstate Financial Market	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.73	

Full Name (Last, First, Middle Initial) C. JEFFREY D KNIPP		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2050 GLENDALE AVE		Transaction ID: A2006-976890
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.66
Name of Employer Allstate Insurance Company	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.43	

SUBTOTAL of Receipts This Page (optional)	▶	72.98
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 121 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. GARY L KOCHANЕК		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 743 CARDIGAN CT		Transaction ID: A2006-975332	
City NAPERVILLE	State IL	Zip Code 60565	Amount of Each Receipt this Period 32.70
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.40		

Full Name (Last, First, Middle Initial) B. GARY L KOCHANЕК		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 743 CARDIGAN CT		Transaction ID: A2006-976689	
City NAPERVILLE	State IL	Zip Code 60565	Amount of Each Receipt this Period 32.70
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.10		

Full Name (Last, First, Middle Initial) C. KAREN L KRAINZ		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 23080 W MILTON ROAD		Transaction ID: A2006-975496	
City MUNDELEIN	State IL	Zip Code 60060	Amount of Each Receipt this Period 10.65
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Actuary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.11		

SUBTOTAL of Receipts This Page (optional) ▶	76.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 122 / 263						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOANNE L KRON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 341 N FIORE PARKWAY		Transaction ID: A2006-975327	
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 39.77		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 513.04		

Full Name (Last, First, Middle Initial) B. JOANNE L KRON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 341 N FIORE PARKWAY		Transaction ID: A2006-976684	
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 39.77		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 552.81		

Full Name (Last, First, Middle Initial) C. MICHAEL A LA MONICA		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 22401 BROOKSIDE WAY		Transaction ID: A2006-975393	
City State Zip Code LAKE BARRINGTON IL 60010	Amount of Each Receipt this Period 65.33		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Product		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.66		

SUBTOTAL of Receipts This Page (optional) ▶	144.87
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 123 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL A LA MONICA

Mailing Address 22401 BROOKSIDE WAY

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 835.99

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976739

Amount of Each Receipt this Period
65.33

B. Full Name (Last, First, Middle Initial)
ANTHONY LASKA

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 498.04

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975150

Amount of Each Receipt this Period
42.67

C. Full Name (Last, First, Middle Initial)
ANTHONY LASKA

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.71

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976519

Amount of Each Receipt this Period
42.67

SUBTOTAL of Receipts This Page (optional)	▶	150.67
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DEBORAH G LAWRENCE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 910 S MICHIGAN AVE #1501		Transaction ID: A2006-975299
City State Zip Code CHICAGO IL 60605	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.56	

Full Name (Last, First, Middle Initial) B. DEBORAH G LAWRENCE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 910 S MICHIGAN AVE #1501		Transaction ID: A2006-976659
City State Zip Code CHICAGO IL 60605	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.44	

Full Name (Last, First, Middle Initial) C. PHILLIP E LAWSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 900 PARK AVENUE NORTH		Transaction ID: A2006-975566
City State Zip Code WINTER PARK FL 32789	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 69.56
Name of Employer Allstate Insurance Company	Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 820.58	

SUBTOTAL of Receipts This Page (optional)	109.32
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PHILLIP E LAWSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 900 PARK AVENUE NORTH		Transaction ID: A2006-976896
City State Zip Code WINTER PARK FL 32789	Amount of Each Receipt this Period 69.56	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 890.14	

Full Name (Last, First, Middle Initial) B. CATHY A LAZAROFF		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 910 S MICHIGAN AVE #1503		Transaction ID: A2006-975136
City State Zip Code CHICAGO IL 60605	Amount of Each Receipt this Period 55.62	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 545.50	

Full Name (Last, First, Middle Initial) C. CATHY A LAZAROFF		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 910 S MICHIGAN AVE #1503		Transaction ID: A2006-976506
City State Zip Code CHICAGO IL 60605	Amount of Each Receipt this Period 55.62	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.12	

SUBTOTAL of Receipts This Page (optional) ▶	180.80
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHELLE LEE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1404 100TH AVENUE NE		Transaction ID: A2006-975615	
City State Zip Code BELLEVUE WA 98004	Amount of Each Receipt this Period 54.04		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 637.49		

Full Name (Last, First, Middle Initial) B. MICHELLE LEE		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1404 100TH AVENUE NE		Transaction ID: A2006-976944	
City State Zip Code BELLEVUE WA 98004	Amount of Each Receipt this Period 54.04		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 691.53		

Full Name (Last, First, Middle Initial) C. SUSAN L LEES		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1705 DARTMOUTH LN		Transaction ID: A2006-975121	
City State Zip Code DEERFIELD IL 60015	Amount of Each Receipt this Period 23.27		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.77		

SUBTOTAL of Receipts This Page (optional) ▶	131.35
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 127 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SUSAN L LEES		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1705 DARTMOUTH LN		Transaction ID: A2006-976492	
City State Zip Code DEERFIELD IL 60015	Amount of Each Receipt this Period 23.27		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.04		

Full Name (Last, First, Middle Initial) B. ANDREW P LEICHT		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 25658 N ARROWHEAD		Transaction ID: A2006-975338	
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 32.69		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.28		

Full Name (Last, First, Middle Initial) C. ANDREW P LEICHT		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 25658 N ARROWHEAD		Transaction ID: A2006-976694	
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 32.69		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 424.97		

SUBTOTAL of Receipts This Page (optional) ▶	88.65
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. NANCY L LEMKE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 5697 BROOKSTONE WALK		Transaction ID: A2006-975415
City State Zip Code ACWORTH GA 30101	Amount of Each Receipt this Period 20.85	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior Field Corporate Re	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.45	

Full Name (Last, First, Middle Initial) B. NANCY L LEMKE		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 5697 BROOKSTONE WALK		Transaction ID: A2006-976761
City State Zip Code ACWORTH GA 30101	Amount of Each Receipt this Period 20.85	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior Field Corporate Re	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.30	

Full Name (Last, First, Middle Initial) C. KELLY J LIEN		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 3 BEDFORD COURT		Transaction ID: A2006-976917
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 16.69	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.57	

SUBTOTAL of Receipts This Page (optional) ▶	58.39
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 129 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
THOMAS J LOGAN

Mailing Address 400 MANDA LN APT 615

City State Zip Code
WHEELING IL 60090

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

Name of Employer Allstate Insurance Company Occupation Senior Actuary and Direct

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.96

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975268

Amount of Each Receipt this Period
40.86

B. Full Name (Last, First, Middle Initial)
TERESA G LOGUE

Mailing Address 7187 PRESIDENTIAL DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Direct Response

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 246.84

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975363

Amount of Each Receipt this Period
21.27

C. Full Name (Last, First, Middle Initial)
TERESA G LOGUE

Mailing Address 7187 PRESIDENTIAL DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Direct Response

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.11

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976716

Amount of Each Receipt this Period
21.27

SUBTOTAL of Receipts This Page (optional)	▶	83.40
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 130 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CHRISTOPHER T LONGEWAY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1134 W. PATTERSON #1		Transaction ID: A2006-975403	
City State Zip Code CHICAGO IL 60613	Amount of Each Receipt this Period 27.02		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Associate Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 319.09		

Full Name (Last, First, Middle Initial) B. CHRISTOPHER T LONGEWAY		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1134 W. PATTERSON #1		Transaction ID: A2006-976749	
City State Zip Code CHICAGO IL 60613	Amount of Each Receipt this Period 27.02		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Associate Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.11		

Full Name (Last, First, Middle Initial) C. RICHARD E LOTT		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 4666 SW HAMMOCK CREEK DR		Transaction ID: A2006-976619	
City State Zip Code PALM CITY FL 34990	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.55		

SUBTOTAL of Receipts This Page (optional) ▶	70.39
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN C LOUNDS		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 4424 STONEHAVEN		Transaction ID: A2006-975494
City LONG GROVE	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.40
Name of Employer Allstate Insurance Company	Occupation Vice President Product AF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.40	

Full Name (Last, First, Middle Initial) B. JOHN C LOUNDS		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 4424 STONEHAVEN		Transaction ID: A2006-976830
City LONG GROVE	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.40
Name of Employer Allstate Insurance Company	Occupation Vice President Product AF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.80	

Full Name (Last, First, Middle Initial) C. BENJAMIN E LUMICAO		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 343 S. DEARBORN ST. APT. 504		Transaction ID: A2006-975448
City CHICAGO	State IL	Zip Code 60604
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.40
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.90	

SUBTOTAL of Receipts This Page (optional)	▶	100.20
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 132 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BENJAMIN E LUMICAO		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 343 S. DEARBORN ST. APT. 504		Transaction ID: A2006-976790
City CHICAGO	State IL	Zip Code 60604
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.40
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.30	

Full Name (Last, First, Middle Initial) B. DANIEL J MACDONALD		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 2250 RIDGETRAIL DR		Transaction ID: A2006-975508
City CASTLE ROCK	State CO	Zip Code 80104
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.96
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.27	

Full Name (Last, First, Middle Initial) C. DANIEL J MACDONALD		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 2250 RIDGETRAIL DR		Transaction ID: A2006-976842
City CASTLE ROCK	State CO	Zip Code 80104
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.96
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.23	

SUBTOTAL of Receipts This Page (optional)	75.32
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 133 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MORRIS A MADURO		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address PO BOX 4343		Transaction ID: A2006-975149	
City NAPERVILLE	State IL	Zip Code 60567	Amount of Each Receipt this Period 36.22
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.19		

Full Name (Last, First, Middle Initial) B. MORRIS A MADURO		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address PO BOX 4343		Transaction ID: A2006-976518	
City NAPERVILLE	State IL	Zip Code 60567	Amount of Each Receipt this Period 36.22
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.41		

Full Name (Last, First, Middle Initial) C. THOMAS L MAIO		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1214 EAST CRABTREE		Transaction ID: A2006-975364	
City ARLINGTON HTS	State IL	Zip Code 60004	Amount of Each Receipt this Period 20.42
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Accounting Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.75		

SUBTOTAL of Receipts This Page (optional) ▶	92.86
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 134 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KATHERINE MALCOMSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 185 NILES EAST		Transaction ID: A2006-975487	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 18.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Education and Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.45		

Full Name (Last, First, Middle Initial) B. KATHERINE MALCOMSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 185 NILES EAST		Transaction ID: A2006-976825	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 18.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Education and Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.80		

Full Name (Last, First, Middle Initial) C. FELIX A MANTILLA		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 28601 N. Sky Crest Drive		Transaction ID: A2006-975511	
City State Zip Code Ivanhoe IL 60060	Amount of Each Receipt this Period 45.38		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 532.94		

SUBTOTAL of Receipts This Page (optional) ▶	82.08
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. FELIX A MANTILLA		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 28601 N. Sky Crest Drive		Transaction ID: A2006-976844
City Ivanhoe	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.38
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 578.32	

Full Name (Last, First, Middle Initial) B. KENNETH P MARCOTTE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 2311 HAVERTON DR		Transaction ID: A2006-975343
City MUNDELEIN	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.38
Name of Employer Allstate Insurance Company	Occupation Finance Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.21	

Full Name (Last, First, Middle Initial) C. KENNETH P MARCOTTE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2311 HAVERTON DR		Transaction ID: A2006-976699
City MUNDELEIN	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.38
Name of Employer Allstate Insurance Company	Occupation Finance Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.59	

SUBTOTAL of Receipts This Page (optional)	80.14
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 136 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN R MATHEWS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 401 E NORTH AVENUE		Transaction ID: A2006-975449
City LAKE BLUFF	State IL	Zip Code 60044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.49	

Full Name (Last, First, Middle Initial) B. JOHN R MATHEWS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 401 E NORTH AVENUE		Transaction ID: A2006-976791
City LAKE BLUFF	State IL	Zip Code 60044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.37	

Full Name (Last, First, Middle Initial) C. W. D Mays		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 256 Post Oak Drive		Transaction ID: A2006-976591
City Roanoke	State VA	Zip Code 24019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Territory Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.80	

SUBTOTAL of Receipts This Page (optional)	56.11
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL J MC CABE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 8 S. WYNSTONE DRIVE		Transaction ID: A2006-975580	
City State Zip Code N. BARRINGTON IL 60010	Amount of Each Receipt this Period 115.39		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP & Chief Legal Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1323.29		

Full Name (Last, First, Middle Initial) B. MICHAEL J MC CABE		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 8 S. WYNSTONE DRIVE		Transaction ID: A2006-976909	
City State Zip Code N. BARRINGTON IL 60010	Amount of Each Receipt this Period 115.39		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP & Chief Legal Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1438.68		

Full Name (Last, First, Middle Initial) C. GERARD F MC DERMOTT		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 5378 BLACK BEAR LANE		Transaction ID: A2006-975134	
City State Zip Code ROANOKE VA 24014	Amount of Each Receipt this Period 29.63		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Operations Center		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.40		

SUBTOTAL of Receipts This Page (optional) ▶	260.41
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GERARD F MC DERMOTT

Mailing Address 5378 BLACK BEAR LANE

City ROANOKE State VA Zip Code 24014

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

Name of Employer Allstate Insurance Company Occupation AVP Operations Center

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 379.03

Date of Receipt
06 / 23 / 2006

Transaction ID: A2006-976505

Amount of Each Receipt this Period
29.63

B. Full Name (Last, First, Middle Initial)
MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City BARRINGTON HILL State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 862.11

Date of Receipt
06 / 09 / 2006

Transaction ID: A2006-975431

Amount of Each Receipt this Period
72.70

C. Full Name (Last, First, Middle Initial)
MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City BARRINGTON HILL State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 934.81

Date of Receipt
06 / 23 / 2006

Transaction ID: A2006-976775

Amount of Each Receipt this Period
72.70

SUBTOTAL of Receipts This Page (optional)	▶	175.03
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DAVID A MC HALE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 8756 MAPLE HOLLOW CT.		Transaction ID: A2006-975365	
City State Zip Code GRANITE BAY CA 95746	Amount of Each Receipt this Period 53.02		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.05		

Full Name (Last, First, Middle Initial) B. DAVID A MC HALE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 8756 MAPLE HOLLOW CT.		Transaction ID: A2006-976717	
City State Zip Code GRANITE BAY CA 95746	Amount of Each Receipt this Period 53.02		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 713.07		

Full Name (Last, First, Middle Initial) C. JOHN A MC LAUGHLIN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 3851 N. Parkway Drive #21C		Transaction ID: A2006-975378	
City State Zip Code Northbrook IL 60062	Amount of Each Receipt this Period 38.36		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 453.32		

SUBTOTAL of Receipts This Page (optional) ▶	144.40
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 140 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN A MC LAUGHLIN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 3851 N. Parkway Drive #21C		Transaction ID: A2006-976726
City State Zip Code Northbrook IL 60062	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.36
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 491.68	

Full Name (Last, First, Middle Initial) B. PATRICIA M MCCARTHY		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 222 STONE FENCE ROAD		Transaction ID: A2006-975166
City State Zip Code VERNON HILLS IL 60061	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.36	

Full Name (Last, First, Middle Initial) C. PATRICIA M MCCARTHY		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 222 STONE FENCE ROAD		Transaction ID: A2006-976534
City State Zip Code VERNON HILLS IL 60061	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.24	

SUBTOTAL of Receipts This Page (optional)	▶	78.12
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CHARLTON T MCDONALD		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 195 ALPINE DRIVE		Transaction ID: A2006-975315	
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 25.29		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Insurance Reserve		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.46		

Full Name (Last, First, Middle Initial) B. CHARLTON T MCDONALD		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 195 ALPINE DRIVE		Transaction ID: A2006-976674	
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 25.29		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Insurance Reserve		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.75		

Full Name (Last, First, Middle Initial) C. MARK J MCDONNELL		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 70 MC ECHRON LANE		Transaction ID: A2006-975190	
City State Zip Code QUEENSBURY NY 12804	Amount of Each Receipt this Period 25.03		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Regional Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.11		

SUBTOTAL of Receipts This Page (optional) ▶	75.61
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARK J MCDONNELL		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 70 MC ECHRON LANE		Transaction ID: A2006-976555
City QUEENSBURY State NY Zip Code 12804	Amount of Each Receipt this Period 25.03	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation Regional Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	316.14

Full Name (Last, First, Middle Initial) B. MARK A MCGILLIVRAY		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 1028 PORTSMOUTH CIRCLE		Transaction ID: A2006-975589
City GURNEE State IL Zip Code 60031	Amount of Each Receipt this Period 19.73	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation AVP PCCSO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	230.18

Full Name (Last, First, Middle Initial) C. MARK A MCGILLIVRAY		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 1028 PORTSMOUTH CIRCLE		Transaction ID: A2006-976918
City GURNEE State IL Zip Code 60031	Amount of Each Receipt this Period 19.73	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation AVP PCCSO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	249.91

SUBTOTAL of Receipts This Page (optional)	64.49
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. EVA M MCINTEE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 28 MANCERA		Transaction ID: A2006-975584	
City RANCHO SANTA MA	State CA	Zip Code 92688	Amount of Each Receipt this Period 28.43
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.41		

Full Name (Last, First, Middle Initial) B. EVA M MCINTEE		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 28 MANCERA		Transaction ID: A2006-976913	
City RANCHO SANTA MA	State CA	Zip Code 92688	Amount of Each Receipt this Period 28.43
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.84		

Full Name (Last, First, Middle Initial) C. MICHAEL MCKINNEY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1207 DEVENS DRIVE		Transaction ID: A2006-975222	
City BRENTWOOD	State TN	Zip Code 37027	Amount of Each Receipt this Period 42.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 505.81		

SUBTOTAL of Receipts This Page (optional) ▶	99.74
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL MCKINNEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1207 DEVENS DRIVE		Transaction ID: A2006-976586	
City State Zip Code BRENTWOOD TN 37027	Amount of Each Receipt this Period 42.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 548.69		

Full Name (Last, First, Middle Initial) B. RONALD D MCNEIL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 76 HILLBURN LANE		Transaction ID: A2006-975492	
City State Zip Code NO BARRINGTON IL 60010	Amount of Each Receipt this Period 112.15		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP-Protection Distributi		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1319.69		

Full Name (Last, First, Middle Initial) C. RONALD D MCNEIL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 76 HILLBURN LANE		Transaction ID: A2006-976828	
City State Zip Code NO BARRINGTON IL 60010	Amount of Each Receipt this Period 112.15		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP-Protection Distributi		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1431.84		

SUBTOTAL of Receipts This Page (optional) ▶	267.18
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PATRICIA S MCPHERSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 288 CHESHIRE ROAD		Transaction ID: A2006-976924	
City HUDSON State OH Zip Code 44236	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Risk Management Business		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.20		

Full Name (Last, First, Middle Initial) B. JEFFREY J MCRAE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1213 THORNDAL LN		Transaction ID: A2006-975266	
City LAKE ZURICH State IL Zip Code 60047	Amount of Each Receipt this Period 18.97		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Finance Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.24		

Full Name (Last, First, Middle Initial) C. JEFFREY J MCRAE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1213 THORNDAL LN		Transaction ID: A2006-976630	
City LAKE ZURICH State IL Zip Code 60047	Amount of Each Receipt this Period 18.97		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Finance Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.21		

SUBTOTAL of Receipts This Page (optional) ▶	54.29
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. GARY A MELLINI		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 21050 PRESTWICK DRIVE		Transaction ID: A2006-975142	
City State Zip Code BARRINGTON IL 60010	Amount of Each Receipt this Period 31.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 367.25		

Full Name (Last, First, Middle Initial) B. GARY A MELLINI		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 21050 PRESTWICK DRIVE		Transaction ID: A2006-976512	
City State Zip Code BARRINGTON IL 60010	Amount of Each Receipt this Period 31.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 398.56		

Full Name (Last, First, Middle Initial) C. JANE M MELLON		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 184 GARFIELD		Transaction ID: A2006-975350	
City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 38.82		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 459.29		

SUBTOTAL of Receipts This Page (optional) ▶	101.44
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JANE M MELLON		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 184 GARFIELD		Transaction ID: A2006-976705
City State Zip Code ELMHURST IL 60126	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.82
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 498.11	

Full Name (Last, First, Middle Initial) B. HANS H METZINGER		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 407 E. CLAIRE LANE		Transaction ID: A2006-975412
City State Zip Code PROSPECT HTS IL 60070	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.44	

Full Name (Last, First, Middle Initial) C. HANS H METZINGER		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 407 E. CLAIRE LANE		Transaction ID: A2006-976758
City State Zip Code PROSPECT HTS IL 60070	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.79	

SUBTOTAL of Receipts This Page (optional)	71.52
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 / 263		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JACK C MIGDAL		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 4240 FOREST GLEN DRIVE		Transaction ID: A2006-976537
City State Zip Code HOFFMAN ESTATES IL 60195	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.55	

Full Name (Last, First, Middle Initial) B. STEVEN M MILLER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1625 THORNEAPPLE LANE		Transaction ID: A2006-975477
City State Zip Code ALGONQUIN IL 60102	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.37
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.14	

Full Name (Last, First, Middle Initial) C. FREDERICK J MILLER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 6975 MEADOW POINT TER		Transaction ID: A2006-976654
City State Zip Code NEW MARKET MD 21774	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 21.47
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.28	

SUBTOTAL of Receipts This Page (optional)	▶	57.19
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. STEVEN M MILLER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1625 THORNEAPPLE LANE		Transaction ID: A2006-976818
City ALGONQUIN	State IL	Zip Code 60102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.37
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.51	

Full Name (Last, First, Middle Initial) B. CHRISTINE K MINER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 25264 MCINTYRE SQUARE		Transaction ID: A2006-975257
City SOUTH RIDING	State VA	Zip Code 20152
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.68
Name of Employer Allstate Insurance Company	Occupation Field Product Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.71	

Full Name (Last, First, Middle Initial) C. CHRISTINE K MINER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 25264 MCINTYRE SQUARE		Transaction ID: A2006-976621
City SOUTH RIDING	State VA	Zip Code 20152
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.68
Name of Employer Allstate Insurance Company	Occupation Field Product Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.39	

SUBTOTAL of Receipts This Page (optional)	▶	64.73
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
NEIL J MINNICH

Mailing Address 405 N. WABASH AVE. UNIT 4210

City State Zip Code
CHICAGO IL 60611

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

Name of Employer Allstate Insurance Company Occupation Underwriting Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 472.66

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975128

Amount of Each Receipt this Period
39.63

B. Full Name (Last, First, Middle Initial)
NEIL J MINNICH

Mailing Address 405 N. WABASH AVE. UNIT 4210

City State Zip Code
CHICAGO IL 60611

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

Name of Employer Allstate Insurance Company Occupation Underwriting Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 512.29

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976499

Amount of Each Receipt this Period
39.63

C. Full Name (Last, First, Middle Initial)
LAWRENCE P MOEWS

Mailing Address 740 W. JENNIFER CT.

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation Vice President Investor R

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 514.49

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975341

Amount of Each Receipt this Period
47.65

SUBTOTAL of Receipts This Page (optional)	▶	126.91
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LAWRENCE P MOEWS

Mailing Address 740 W. JENNIFER CT.

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation Vice President Investor R

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 562.14

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976697

Amount of Each Receipt this Period
47.65

B. Full Name (Last, First, Middle Initial)
MARCIE E MOLEK

Mailing Address 400 KEVIN LANE

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.01

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975360

Amount of Each Receipt this Period
19.95

C. Full Name (Last, First, Middle Initial)
MARCIE E MOLEK

Mailing Address 400 KEVIN LANE

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.96

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976713

Amount of Each Receipt this Period
19.95

SUBTOTAL of Receipts This Page (optional)	87.55
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SHARON L MOLLER		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 19702 88TH AVE W		Transaction ID: A2006-976923
City EDMONDS	State WA	Zip Code 98026
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.55	

Full Name (Last, First, Middle Initial) B. EDWARD J MORAN		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 131 ADELAIDE UNIT 406		Transaction ID: A2006-975212
City ELMHURST	State IL	Zip Code 60126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.22
Name of Employer Allstate Insurance Company	Occupation AVP PCCSO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 558.59	

Full Name (Last, First, Middle Initial) C. EDWARD J MORAN		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 131 ADELAIDE UNIT 406		Transaction ID: A2006-976576
City ELMHURST	State IL	Zip Code 60126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.22
Name of Employer Allstate Insurance Company	Occupation AVP PCCSO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 605.81	

SUBTOTAL of Receipts This Page (optional)	▶	110.79
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 153 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KAREN S MORRIS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 27707 LA VISTA DRIVE		Transaction ID: A2006-975452
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 38.09	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 447.48	

Full Name (Last, First, Middle Initial) B. KAREN S MORRIS		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 27707 LA VISTA DRIVE		Transaction ID: A2006-976794
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 38.09	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.57	

Full Name (Last, First, Middle Initial) C. LARRY E MOSER		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 611 W. BURNING TREE LANE		Transaction ID: A2006-975349
City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 28.27	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Sales Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.14	

SUBTOTAL of Receipts This Page (optional) ▶	104.45
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LARRY E MOSER

Mailing Address 611 W. BURNING TREE LANE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation Sales Operations Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 363.41

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976704

Amount of Each Receipt this Period
28.27

B. Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 329.04

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975219

Amount of Each Receipt this Period
27.92

C. Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.32

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975334

Amount of Each Receipt this Period
35.26

SUBTOTAL of Receipts This Page (optional)	▶	91.45
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 155 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 356.96

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976583

Amount of Each Receipt this Period
27.92

B. Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.58

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976690

Amount of Each Receipt this Period
35.26

C. Full Name (Last, First, Middle Initial)
ELADIO R MUNIZ

Mailing Address 11127 SPYGLASS HILL LANE

City ALBUQUERQUE State NM Zip Code 87111

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 209.40

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976552

Amount of Each Receipt this Period
16.35

SUBTOTAL of Receipts This Page (optional) ► **79.53**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL A MURPHY

Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 469.07

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975550

Amount of Each Receipt this Period
39.76

B. Full Name (Last, First, Middle Initial)
MICHAEL A MURPHY

Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 508.83

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976880

Amount of Each Receipt this Period
39.76

C. Full Name (Last, First, Middle Initial)
DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel &

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 537.75

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975471

Amount of Each Receipt this Period
46.23

SUBTOTAL of Receipts This Page (optional)	▶	125.75
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 157 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DAVID G NADIG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 2950 LAKE PLACID		Transaction ID: A2006-976813	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 46.23
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 583.98		

Full Name (Last, First, Middle Initial) B. BRIAN J NAGEL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1211 AIMTREE		Transaction ID: A2006-975369	
City SCHAUMBURG	State IL	Zip Code 60194	Amount of Each Receipt this Period 35.95
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 422.85		

Full Name (Last, First, Middle Initial) C. BRIAN J NAGEL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1211 AIMTREE		Transaction ID: A2006-976721	
City SCHAUMBURG	State IL	Zip Code 60194	Amount of Each Receipt this Period 35.95
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.80		

SUBTOTAL of Receipts This Page (optional) ▶	118.13
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOAN M NAUGHTON-GERDES		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 650 MALIBOU		Transaction ID: A2006-975450
City PALATINE	State IL	Zip Code 60074
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.26
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.52	

Full Name (Last, First, Middle Initial) B. JOAN M NAUGHTON-GERDES		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 650 MALIBOU		Transaction ID: A2006-976792
City PALATINE	State IL	Zip Code 60074
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.26
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.78	

Full Name (Last, First, Middle Initial) C. DANIEL C NECASTRO		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 22622 N. LINDEN DR		Transaction ID: A2006-975316
City BARRINGTON	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 104.62
Name of Employer Allstate Insurance Company	Occupation Vice President Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1228.49	

SUBTOTAL of Receipts This Page (optional)	▶	143.14
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 159 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DANIEL C NECASTRO		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 22622 N. LINDEN DR		Transaction ID: A2006-976675	
City State Zip Code BARRINGTON IL 60010	Amount of Each Receipt this Period 104.62		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1333.11		

Full Name (Last, First, Middle Initial) B. NEIL C NELSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 2794 BRECKENRIDGE CIRCLE		Transaction ID: A2006-975503	
City State Zip Code AURORA IL 60504	Amount of Each Receipt this Period 25.59		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.13		

Full Name (Last, First, Middle Initial) C. NEIL C NELSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 2794 BRECKENRIDGE CIRCLE		Transaction ID: A2006-976837	
City State Zip Code AURORA IL 60504	Amount of Each Receipt this Period 25.59		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.72		

SUBTOTAL of Receipts This Page (optional) ▶	155.80
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JEANNIE M NEWMAN		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 9969 LONGVIEW DRIVE		Transaction ID: A2006-975578
City LITTLETON	State CO	Zip Code 80124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.91
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.92	

Full Name (Last, First, Middle Initial) B. JEANNIE M NEWMAN		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 9969 LONGVIEW DRIVE		Transaction ID: A2006-976908
City LITTLETON	State CO	Zip Code 80124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.91
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.83	

Full Name (Last, First, Middle Initial) C. PATRICK K NOLL		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 22451 THORNBURY CT		Transaction ID: A2006-975551
City DEER PARK	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.77
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.43	

SUBTOTAL of Receipts This Page (optional)	▶	57.59
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 161 / 263						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PATRICK K NOLL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 22451 THORNBURY CT		Transaction ID: A2006-976881	
City State Zip Code DEER PARK IL 60010	Amount of Each Receipt this Period 21.77		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.20		

Full Name (Last, First, Middle Initial) B. JO B NORTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 611 WESTBROOK DRIVE		Transaction ID: A2006-975541	
City State Zip Code AUSTIN TX 78746	Amount of Each Receipt this Period 24.60		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.05		

Full Name (Last, First, Middle Initial) C. JO B NORTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 611 WESTBROOK DRIVE		Transaction ID: A2006-976872	
City State Zip Code AUSTIN TX 78746	Amount of Each Receipt this Period 24.60		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.65		

SUBTOTAL of Receipts This Page (optional) ▶	70.97
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 162 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD C O'BRIEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 574 S. COUNTRY RIDGE		Transaction ID: A2006-975308	
City State Zip Code LAKE ZURICH IL 60047		Amount of Each Receipt this Period 17.72	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.64	

Full Name (Last, First, Middle Initial) B. RICHARD C O'BRIEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 574 S. COUNTRY RIDGE		Transaction ID: A2006-976667	
City State Zip Code LAKE ZURICH IL 60047		Amount of Each Receipt this Period 17.72	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 227.36	

Full Name (Last, First, Middle Initial) C. BRIAN M O'DELL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 3434 WHITE ADMIRAL COURT		Transaction ID: A2006-975224	
City State Zip Code EDGEWATER MD 21037		Amount of Each Receipt this Period 31.32	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.84	

SUBTOTAL of Receipts This Page (optional) ▶	66.76
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BRIAN M O'DELL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 3434 WHITE ADMIRAL COURT		Transaction ID: A2006-976588
City EDGEWATER	State MD	Zip Code 21037
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.32
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 407.16	

Full Name (Last, First, Middle Initial) B. JOHN O'MALLEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1816 ASPEN LANE		Transaction ID: A2006-976784
City MOUNT PROSPECT	State IL	Zip Code 60056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.07
Name of Employer Allstate Insurance Company	Occupation Human Resource Senior Man	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.11	

Full Name (Last, First, Middle Initial) C. MICHAEL P O'SHEA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 2505 NEWPORT DRIVE		Transaction ID: A2006-975168
City NAPERVILLE	State IL	Zip Code 60565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.54
Name of Employer Allstate Insurance Company	Occupation Agency Consulting Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.73	

SUBTOTAL of Receipts This Page (optional)	71.93
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL P O'SHEA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2505 NEWPORT DRIVE		Transaction ID: A2006-976536
City NAPERVILLE	State IL	Zip Code 60565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.54
Name of Employer Allstate Insurance Company	Occupation Agency Consulting Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 314.27	

Full Name (Last, First, Middle Initial) B. EDWARD J OBERLE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 4 WHITE CHAPEL CT		Transaction ID: A2006-976496
City ALGONQUIN	State IL	Zip Code 60102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.67
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.71	

Full Name (Last, First, Middle Initial) C. ROGER D ODLE II		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 5170 BARCROFT DRIVE		Transaction ID: A2006-975437
City HOFFMAN ESTATES	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.51
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.72	

SUBTOTAL of Receipts This Page (optional)	▶	69.72
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 165 / 263						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROGER D ODLE II		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 5170 BARCROFT DRIVE		Transaction ID: A2006-976781	
City State Zip Code HOFFMAN ESTATES IL 60010	Amount of Each Receipt this Period 29.51		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.23		

Full Name (Last, First, Middle Initial) B. KATHY A OLCESE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 35 YORK ST		Transaction ID: A2006-975297	
City State Zip Code HUDSON OH 44236	Amount of Each Receipt this Period 22.20		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Risk Management Busin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.38		

Full Name (Last, First, Middle Initial) C. KATHY A OLCESE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 35 YORK ST		Transaction ID: A2006-976657	
City State Zip Code HUDSON OH 44236	Amount of Each Receipt this Period 22.20		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Risk Management Busin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.58		

SUBTOTAL of Receipts This Page (optional) ▶	73.91
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 166 / 263
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CRAIG A OLDHAM

Mailing Address 2606 N Paulina ST

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 381.10

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975518

Amount of Each Receipt this Period
32.40

B. Full Name (Last, First, Middle Initial)
CRAIG A OLDHAM

Mailing Address 2606 N Paulina ST

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 413.50

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976850

Amount of Each Receipt this Period
32.40

C. Full Name (Last, First, Middle Initial)
AL W OLSSON JR

Mailing Address 1524 BONHAM CT

City State Zip Code
IRVING TX 75038

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

Name of Employer Allstate Insurance Company Occupation AVP Data Center

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 666.97

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975130

Amount of Each Receipt this Period
56.38

SUBTOTAL of Receipts This Page (optional) ► **121.18**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. AL W OLSSON JR		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1524 BONHAM CT		Transaction ID: A2006-976501	
City State Zip Code IRVING TX 75038	Amount of Each Receipt this Period 56.38		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Data Center		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 723.35		

Full Name (Last, First, Middle Initial) B. JAMES L OSBORNE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1224 ST. WILLIAM		Transaction ID: A2006-975538	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 60.96		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Procuremen		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 717.10		

Full Name (Last, First, Middle Initial) C. JAMES L OSBORNE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1224 ST. WILLIAM		Transaction ID: A2006-976869	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 60.96		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Procuremen		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 778.06		

SUBTOTAL of Receipts This Page (optional) ▶	178.30
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAMELA J OVERTON		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 9352 ANSLEY LANE		Transaction ID: A2006-975264	
City BRENTWOOD	State TN	Zip Code 37027	Amount of Each Receipt this Period 34.58
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Field Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.71		

Full Name (Last, First, Middle Initial) B. PAMELA J OVERTON		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 9352 ANSLEY LANE		Transaction ID: A2006-976628	
City BRENTWOOD	State TN	Zip Code 37027	Amount of Each Receipt this Period 34.58
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Field Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 441.29		

Full Name (Last, First, Middle Initial) C. GEORGE H OXENDINE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1 SOUTH HIGHLAND AVENUE #603		Transaction ID: A2006-975241	
City ARLINGTON HEIGHTS	State IL	Zip Code 60005	Amount of Each Receipt this Period 25.94
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.98		

SUBTOTAL of Receipts This Page (optional) ▶	95.10
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 169 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GEORGE H OXENDINE

Mailing Address 1 SOUTH HIGHLAND AVENUE #603

City State Zip Code
ARLINGTON HEIGHTS IL 60005

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

Name of Employer Allstate Insurance Company Occupation Claim Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.92

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976605

Amount of Each Receipt this Period
25.94

B. Full Name (Last, First, Middle Initial)
ALAN D PAGE

Mailing Address 13530 LUCKY LAKE DRIVE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 414.23

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975609

Amount of Each Receipt this Period
34.62

C. Full Name (Last, First, Middle Initial)
ALAN D PAGE

Mailing Address 13530 LUCKY LAKE DRIVE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 448.85

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976938

Amount of Each Receipt this Period
34.62

SUBTOTAL of Receipts This Page (optional) ► 95.18

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DEAN T PAPPAS		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 3406 VICEROY COURT		Transaction ID: A2006-975214
City EDGEWATER	State MD	Zip Code 21037
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.25
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 463.45	

Full Name (Last, First, Middle Initial) B. DEAN T PAPPAS		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 3406 VICEROY COURT		Transaction ID: A2006-976578
City EDGEWATER	State MD	Zip Code 21037
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.25
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 502.70	

Full Name (Last, First, Middle Initial) C. ROBERT L PARK		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 1107 BONITA DRIVE		Transaction ID: A2006-975438
City PARK RIDGE	State IL	Zip Code 60068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.98
Name of Employer Allstate Insurance Company	Occupation AVP Public Relations Mana	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.40	

SUBTOTAL of Receipts This Page (optional)	▶	129.48
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT L PARK

Mailing Address 1107 BONITA DRIVE

City State Zip Code
PARK RIDGE IL 60068

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

Name of Employer Allstate Insurance Company Occupation AVP Public Relations Mana

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 652.38

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976782

Amount of Each Receipt this Period
50.98

B. Full Name (Last, First, Middle Initial)
ROGER D PARKER

Mailing Address 1305 N MAIDSTONE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation AVP Corporate Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 541.58

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975603

Amount of Each Receipt this Period
46.17

C. Full Name (Last, First, Middle Initial)
ROGER D PARKER

Mailing Address 1305 N MAIDSTONE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation AVP Corporate Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 587.75

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976932

Amount of Each Receipt this Period
46.17

SUBTOTAL of Receipts This Page (optional) ► **143.32**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MAYUR M PATEL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 742 E PARKVIEW CT		Transaction ID: A2006-975372
City State Zip Code ROSELLE IL 60172	Amount of Each Receipt this Period 28.89	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.58	

Full Name (Last, First, Middle Initial) B. MAYUR M PATEL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 742 E PARKVIEW CT		Transaction ID: A2006-976723
City State Zip Code ROSELLE IL 60172	Amount of Each Receipt this Period 28.89	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.47	

Full Name (Last, First, Middle Initial) C. BARRY S PAUL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 3010 LILAC LANE		Transaction ID: A2006-975193
City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 31.44	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP & Assistant Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.98	

SUBTOTAL of Receipts This Page (optional) ▶	89.22
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 772.23

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975198

Amount of Each Receipt this Period
66.19

B. Full Name (Last, First, Middle Initial)
BARRY S PAUL

Mailing Address 3010 LILAC LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation AVP & Assistant Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.42

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976558

Amount of Each Receipt this Period
31.44

C. Full Name (Last, First, Middle Initial)
CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 838.42

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976563

Amount of Each Receipt this Period
66.19

SUBTOTAL of Receipts This Page (optional)	▶	163.82
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RONALD J PEPPING

Mailing Address 934 LEWIS PLACE

City State Zip Code
GENEVA IL 60134

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

Name of Employer Allstate Insurance Company Occupation Ivantage Financial Manage

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975413

Amount of Each Receipt this Period
28.43

B. Full Name (Last, First, Middle Initial)
RONALD J PEPPING

Mailing Address 934 LEWIS PLACE

City State Zip Code
GENEVA IL 60134

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

Name of Employer Allstate Insurance Company Occupation Ivantage Financial Manage

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.84

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976759

Amount of Each Receipt this Period
28.43

C. Full Name (Last, First, Middle Initial)
FLORIE S PERELLIS

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel &

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 535.40

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975156

Amount of Each Receipt this Period
45.69

SUBTOTAL of Receipts This Page (optional)	▶	102.55
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. FLORIE S PERELLIS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1480 MINTHAVEN RD		Transaction ID: A2006-976525	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 45.69		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 581.09		

Full Name (Last, First, Middle Initial) B. NANCY A PERRY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 3575 CALDERWOOD DR		Transaction ID: A2006-976780	
City State Zip Code ROCKFORD IL 61114	Amount of Each Receipt this Period 16.65		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.50		

Full Name (Last, First, Middle Initial) C. JUDITH M PETRAY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 539 KELMORE ST		Transaction ID: A2006-976495	
City State Zip Code MOSS BEACH CA 94038	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Managing Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.55		

SUBTOTAL of Receipts This Page (optional) ▶	78.69
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. STEVEN A PETTI		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 580 SALCEDA DR		Transaction ID: A2006-975155
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 47.19	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Property & Casualty F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 557.81	

Full Name (Last, First, Middle Initial) B. STEVEN A PETTI		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 580 SALCEDA DR		Transaction ID: A2006-976524
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 47.19	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Property & Casualty F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 605.00	

Full Name (Last, First, Middle Initial) C. JAMES M PLOTTS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 1651 TIMBER WOODS LANE		Transaction ID: A2006-975478
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 72.70	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation GVP-AGENCY & CUSTOMER SUP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 853.01	

SUBTOTAL of Receipts This Page (optional) ▶	167.08
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 177 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES M PLOTTS		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 1651 TIMBER WOODS LANE		Transaction ID: A2006-976819
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 72.70
Name of Employer Allstate Insurance Company	Occupation GVP-AGENCY & CUSTOMER SUP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.71	

Full Name (Last, First, Middle Initial) B. CINDY D POWELL		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 227 WHITE FENCE CT.		Transaction ID: A2006-975524
City VERNON HILLS	State IL	Zip Code 60061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.96
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.38	

Full Name (Last, First, Middle Initial) C. DAVID J PRENDERGAST		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 2816 HAVEN LANE		Transaction ID: A2006-975147
City LINDENHURST	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.25
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.60	

SUBTOTAL of Receipts This Page (optional)	113.91
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DAVID J PRENDERGAST		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2816 HAVEN LANE		Transaction ID: A2006-976516
City State Zip Code LINDENHURST IL 60046	Amount of Each Receipt this Period 35.25	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.85	

Full Name (Last, First, Middle Initial) B. MARTIN PRZYGODA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 17516 KATIE COURT		Transaction ID: A2006-975329
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 26.78	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Finance and Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 314.08	

Full Name (Last, First, Middle Initial) C. MARTIN PRZYGODA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 17516 KATIE COURT		Transaction ID: A2006-976686
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 26.78	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Finance and Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.86	

SUBTOTAL of Receipts This Page (optional) ▶	88.81
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 179 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.11

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975468

Amount of Each Receipt this Period
20.38

B. Full Name (Last, First, Middle Initial)
THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.49

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976810

Amount of Each Receipt this Period
20.38

C. Full Name (Last, First, Middle Initial)
JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City State Zip Code
ARLINGTON HGTS IL 60005

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

Name of Employer Allstate Insurance Company Occupation Senior Product Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.73

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975619

Amount of Each Receipt this Period
26.74

SUBTOTAL of Receipts This Page (optional) ► 67.50

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JORGE A QUEZADA		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 1407 W. GROVE ST		Transaction ID: A2006-976946
City ARLINGTON HGTS	State IL	Zip Code 60005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.74
Name of Employer Allstate Insurance Company	Occupation Senior Product Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.47	

Full Name (Last, First, Middle Initial) B. ROBERT M RASNICK		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 193 FOXFIRE RD		Transaction ID: A2006-975172
City LAKE ZURICH	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.96
Name of Employer Allstate Insurance Company	Occupation Field Administration Dire	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.64	

Full Name (Last, First, Middle Initial) C. JOSEPH P RATH		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 359 STAFFORD COURT		Transaction ID: A2006-975280
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.32
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.67	

SUBTOTAL of Receipts This Page (optional)	87.02
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 181 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOSEPH P RATH		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 359 STAFFORD COURT		Transaction ID: A2006-976641
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.32
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 689.99	

Full Name (Last, First, Middle Initial) B. JOHN B REARDON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 441 KELLY LANE		Transaction ID: A2006-975131
City CRYSTAL LAKE	State IL	Zip Code 60012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.15
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 457.80	

Full Name (Last, First, Middle Initial) C. JOHN B REARDON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 441 KELLY LANE		Transaction ID: A2006-976502
City CRYSTAL LAKE	State IL	Zip Code 60012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.15
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.95	

SUBTOTAL of Receipts This Page (optional)	130.62
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOSEPH J RICHARDSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1411 PARSONS LANE		Transaction ID: A2006-975202
City LOWER GWYNEDD	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.70
Name of Employer Allstate Insurance Company	Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 723.81	

Full Name (Last, First, Middle Initial) B. JOSEPH J RICHARDSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1411 PARSONS LANE		Transaction ID: A2006-976567
City LOWER GWYNEDD	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.70
Name of Employer Allstate Insurance Company	Occupation Vice President Field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 785.51	

Full Name (Last, First, Middle Initial) C. ROBIN R RICHMOND		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 9 HAWTHORN GROVE CIRCLE		Transaction ID: A2006-975460
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.68
Name of Employer Allstate Insurance Company	Occupation AVP Technology Shared Ser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.56	

SUBTOTAL of Receipts This Page (optional)	148.08
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 183 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBIN R RICHMOND		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 9 HAWTHORN GROVE CIRCLE		Transaction ID: A2006-976802
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 24.68	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Technology Shared Ser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.24	

Full Name (Last, First, Middle Initial) B. ANDREW T RIEDER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 7 ONEIDA LANE		Transaction ID: A2006-975207
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 45.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Homeowner Initiative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 534.96	

Full Name (Last, First, Middle Initial) C. ANDREW T RIEDER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 7 ONEIDA LANE		Transaction ID: A2006-976572
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 45.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Homeowner Initiative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 580.31	

SUBTOTAL of Receipts This Page (optional) ▶	115.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JESSICA D RIVERA		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 2055 LOCKRIDGE PLACE		Transaction ID: A2006-975614
City State Zip Code EL DORADO HILLS CA 95762	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 45.25
Name of Employer Allstate Insurance Company	Occupation AVP Corporate Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 532.29	

Full Name (Last, First, Middle Initial) B. JESSICA D RIVERA		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 2055 LOCKRIDGE PLACE		Transaction ID: A2006-976943
City State Zip Code EL DORADO HILLS CA 95762	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 45.25
Name of Employer Allstate Insurance Company	Occupation AVP Corporate Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 577.54	

Full Name (Last, First, Middle Initial) C. MARIO RIZZO		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 5926 W. 90TH PLACE		Transaction ID: A2006-975391
City State Zip Code OAK LAWN IL 60453	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.30
Name of Employer Allstate Insurance Company	Occupation AVP Property & Casualty F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 446.23	

SUBTOTAL of Receipts This Page (optional)	128.80
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARIO RIZZO		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 5926 W. 90TH PLACE		Transaction ID: A2006-976737	
City State Zip Code OAK LAWN IL 60453	Amount of Each Receipt this Period 38.30		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Property & Casualty F		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.53		

Full Name (Last, First, Middle Initial) B. DANIEL P ROBERTS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 4374 W Anderson Rd		Transaction ID: A2006-975195	
City State Zip Code South Euclid OH 44121	Amount of Each Receipt this Period 20.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.10		

Full Name (Last, First, Middle Initial) C. THOMAS H ROBERTS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 5273 W. EMERSON AVE.		Transaction ID: A2006-975490	
City State Zip Code PALATINE IL 60067	Amount of Each Receipt this Period 8.66		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.34		

SUBTOTAL of Receipts This Page (optional) ▶	67.21
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 186 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CLAY F ROBERTS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 387 Long Hill Road		Transaction ID: A2006-975604	
City State Zip Code Gurnee IL 60031	Amount of Each Receipt this Period 32.70		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.75		

Full Name (Last, First, Middle Initial) B. DANIEL P ROBERTS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 4374 W Anderson Rd		Transaction ID: A2006-976560	
City State Zip Code South Euclid OH 44121	Amount of Each Receipt this Period 20.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.35		

Full Name (Last, First, Middle Initial) C. CLAY F ROBERTS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 387 Long Hill Road		Transaction ID: A2006-976933	
City State Zip Code Gurnee IL 60031	Amount of Each Receipt this Period 32.70		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Planning Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 424.45		

SUBTOTAL of Receipts This Page (optional) ▶	85.65
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. GREGORY C ROHLFING		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 106 ASHLAND		Transaction ID: A2006-975311	
City RIVER FOREST	State IL	Zip Code 60305	Amount of Each Receipt this Period 39.77
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.93		

Full Name (Last, First, Middle Initial) B. GREGORY C ROHLFING		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 106 ASHLAND		Transaction ID: A2006-976670	
City RIVER FOREST	State IL	Zip Code 60305	Amount of Each Receipt this Period 39.77
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 568.70		

Full Name (Last, First, Middle Initial) C. DONNA J ROSEMEYER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 810 S THURLOW STREET		Transaction ID: A2006-975400	
City HINSDALE	State IL	Zip Code 60521	Amount of Each Receipt this Period 25.95
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.53		

SUBTOTAL of Receipts This Page (optional) ▶	105.49
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City State Zip Code
HINSDALE IL 60521

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

Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.48

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976746

Amount of Each Receipt this Period
25.95

B. Full Name (Last, First, Middle Initial)
JACQUELINE A ROTHE

Mailing Address 4763 WELLINGTON DRIVE

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 209.96

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976940

Amount of Each Receipt this Period
16.27

C. Full Name (Last, First, Middle Initial)
GEORGE E RUEBENSON

Mailing Address 29 FOX TR

City State Zip Code
LINCOLNSHIRE IL 60069

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

Name of Employer Allstate Insurance Company Occupation SVP-P-CCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1053.41

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975456

Amount of Each Receipt this Period
91.15

SUBTOTAL of Receipts This Page (optional)	▶	133.37
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GEORGE E RUEBENSON

Mailing Address 29 FOX TR

City State Zip Code
LINCOLNSHIRE IL 60069

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

Name of Employer Allstate Insurance Company Occupation SVP-P-CCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1144.56

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976798

Amount of Each Receipt this Period
91.15

B. Full Name (Last, First, Middle Initial)
DOREEN M RYAN

Mailing Address 17 ALSTON COURT

City State Zip Code
RED BANK NJ 07701

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

Name of Employer Allstate Insurance Company Occupation Managing Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.60

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975188

Amount of Each Receipt this Period
21.80

C. Full Name (Last, First, Middle Initial)
DOREEN M RYAN

Mailing Address 17 ALSTON COURT

City State Zip Code
RED BANK NJ 07701

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

Name of Employer Allstate Insurance Company Occupation Managing Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 283.40

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976553

Amount of Each Receipt this Period
21.80

SUBTOTAL of Receipts This Page (optional)	▶	134.75
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 190 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAUL R RYSKE		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 898 E. LONGWOOD DR.		Transaction ID: A2006-975309	
City LAKE FOREST	State IL	Amount of Each Receipt this Period 19.88	
Zip Code 60045		Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.88	
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.10		

Full Name (Last, First, Middle Initial) B. PAUL R RYSKE		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 898 E. LONGWOOD DR.		Transaction ID: A2006-976668	
City LAKE FOREST	State IL	Amount of Each Receipt this Period 19.88	
Zip Code 60045		Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.88	
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.98		

Full Name (Last, First, Middle Initial) C. MICHAEL A SCARDINA		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 51 SOUTH ROYAL OAK		Transaction ID: A2006-975282	
City VERNON HILLS	State IL	Amount of Each Receipt this Period 27.73	
Zip Code 60061		Amount of Each Receipt this Period 27.73	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.73	
Name of Employer Allstate Insurance Company	Occupation AVP Asset Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.17		

SUBTOTAL of Receipts This Page (optional) ▶	67.49
TOTAL This Period (last page this line number only) ▶	67.49

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 191 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL A SCARDINA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 51 SOUTH ROYAL OAK		Transaction ID: A2006-976643	
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 27.73		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Asset Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.90		

Full Name (Last, First, Middle Initial) B. PATRICK J SCHNEIDER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 210 NORTH TRAIL		Transaction ID: A2006-975443	
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 27.66		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.27		

Full Name (Last, First, Middle Initial) C. PATRICK J SCHNEIDER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 210 NORTH TRAIL		Transaction ID: A2006-976785	
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 27.66		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 354.93		

SUBTOTAL of Receipts This Page (optional) ▶	83.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP HR Shared Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 556.67

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975191

Amount of Each Receipt this Period
47.97

B. Full Name (Last, First, Middle Initial)
STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP HR Shared Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 604.64

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976556

Amount of Each Receipt this Period
47.97

C. Full Name (Last, First, Middle Initial)
DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City State Zip Code
BUFFALO GROVE IL 60089

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

Name of Employer Allstate Insurance Company Occupation Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.74

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975366

Amount of Each Receipt this Period
22.15

SUBTOTAL of Receipts This Page (optional)	▶	118.09
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 193 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DAVID I SCHUR		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1216 SANDHURST DRIVE		Transaction ID: A2006-976718	
City State Zip Code BUFFALO GROVE IL 60089	Amount of Each Receipt this Period 22.15		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.89		

Full Name (Last, First, Middle Initial) B. MICHAEL D SCHUSTER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 526 LANGE COURT		Transaction ID: A2006-976919	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 15.76		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.78		

Full Name (Last, First, Middle Initial) C. DAVID J SCHWARTZER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1911 205TH PL NE		Transaction ID: A2006-975507	
City State Zip Code SAMMAMISH WA 98074	Amount of Each Receipt this Period 38.89		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.77		

SUBTOTAL of Receipts This Page (optional) ▶	76.80
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 194 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID J SCHWARTZER

Mailing Address 1911 205TH PL NE

City State Zip Code
SAMMAMISH WA 98074

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

Name of Employer Allstate Insurance Company Occupation Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 497.66

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976841

Amount of Each Receipt this Period
38.89

B. Full Name (Last, First, Middle Initial)
ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.55

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976533

Amount of Each Receipt this Period
16.35

C. Full Name (Last, First, Middle Initial)
ROBERT M SCULLY

Mailing Address 302 NORTH VILLAGE ST

City State Zip Code
CELEBRATION FL 34747

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

Name of Employer Allstate Insurance Company Occupation Claims Field Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.76

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975148

Amount of Each Receipt this Period
19.88

SUBTOTAL of Receipts This Page (optional)	▶	75.12
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 195 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT M SCULLY		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 302 NORTH VILLAGE ST		Transaction ID: A2006-976517	
City State Zip Code CELEBRATION FL 34747	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Field Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.64		

Full Name (Last, First, Middle Initial) B. DANNY R SELLERS		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 5903 87TH ST		Transaction ID: A2006-975542	
City State Zip Code LUBBOCK TX 79424	Amount of Each Receipt this Period 23.16		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.57		

Full Name (Last, First, Middle Initial) C. DANNY R SELLERS		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 5903 87TH ST		Transaction ID: A2006-976873	
City State Zip Code LUBBOCK TX 79424	Amount of Each Receipt this Period 23.16		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.73		

SUBTOTAL of Receipts This Page (optional) ▶	66.20
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. STACY Y SHARPE		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 2 E. Erie #1506		Transaction ID: A2006-975430
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.25
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 344.00	

Full Name (Last, First, Middle Initial) B. STACY Y SHARPE		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 2 E. Erie #1506		Transaction ID: A2006-976774
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.25
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 373.25	

Full Name (Last, First, Middle Initial) C. STEVEN E SHEBIK		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 517 ROBINWOOD LANE		Transaction ID: A2006-975399
City WHEATON	State IL	Zip Code 60187
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.15
Name of Employer Allstate Insurance Company	Occupation Vice President Property/C	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 895.46	

SUBTOTAL of Receipts This Page (optional)	134.65
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 197 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. STEVEN E SHEBIK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 517 ROBINWOOD LANE		Transaction ID: A2006-976745
City State Zip Code WHEATON IL 60187	Amount of Each Receipt this Period 76.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Property/C	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 971.61	

Full Name (Last, First, Middle Initial) B. MARY C SHEEHY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 708 S SEE-GWUN AVE		Transaction ID: A2006-975356
City State Zip Code MT PROSPECT IL 60056	Amount of Each Receipt this Period 18.68	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.29	

Full Name (Last, First, Middle Initial) C. STEVEN R SHEFFEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 839 SUMAC		Transaction ID: A2006-975303
City State Zip Code HIGHLAND PARK IL 60035	Amount of Each Receipt this Period 19.22	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.04	

SUBTOTAL of Receipts This Page (optional) ▶	114.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. STEVEN R SHEFFEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 839 SUMAC		Transaction ID: A2006-976663
City State Zip Code HIGHLAND PARK IL 60035	Amount of Each Receipt this Period 19.22	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.26	

Full Name (Last, First, Middle Initial) B. DENIS C SHUNTA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 5200 RIDGEGATE WAY		Transaction ID: A2006-975481
City State Zip Code FAIR OAKS CA 95628	Amount of Each Receipt this Period 21.76	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Field Product Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.12	

Full Name (Last, First, Middle Initial) C. DENIS C SHUNTA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 5200 RIDGEGATE WAY		Transaction ID: A2006-976821
City State Zip Code FAIR OAKS CA 95628	Amount of Each Receipt this Period 21.76	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Field Product Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.88	

SUBTOTAL of Receipts This Page (optional) ▶	62.74
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 199 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID J SILVERMAN

Mailing Address 382 BARN SWALLOW LANE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation Claim Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
447.52

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975479

Amount of Each Receipt this Period
82.98

B. Full Name (Last, First, Middle Initial)
ROBERT L SIMMONS

Mailing Address 418 DEUCE DRIVE

City State Zip Code
WALL NJ 07719

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.34

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975178

Amount of Each Receipt this Period
27.47

C. Full Name (Last, First, Middle Initial)
ROBERT L SIMMONS

Mailing Address 418 DEUCE DRIVE

City State Zip Code
WALL NJ 07719

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
352.81

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976545

Amount of Each Receipt this Period
27.47

SUBTOTAL of Receipts This Page (optional) ► **137.92**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KIMBALL S SIMON		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 11 WEHRHEIM		Transaction ID: A2006-975571	
City BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 34.98
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.16		

Full Name (Last, First, Middle Initial) B. KIMBALL S SIMON		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 11 WEHRHEIM		Transaction ID: A2006-976901	
City BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 34.98
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 441.14		

Full Name (Last, First, Middle Initial) C. ANNE E SIMPSON		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 632 ONWENTSIA AVENUE		Transaction ID: A2006-975314	
City HIGHLAND PARK	State IL	Zip Code 60035	Amount of Each Receipt this Period 26.51
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Tax Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.52		

SUBTOTAL of Receipts This Page (optional) ▶	96.47
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 201 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANNE E SIMPSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 632 ONWENTSIA AVENUE		Transaction ID: A2006-976673	
City State Zip Code HIGHLAND PARK IL 60035	Amount of Each Receipt this Period 26.51		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Tax Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 344.03		

Full Name (Last, First, Middle Initial) B. JOHN G SINNICKI		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 2117 CARROLL CREEK VIEW CT		Transaction ID: A2006-975258	
City State Zip Code FREDERICK MD 21702	Amount of Each Receipt this Period 19.37		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Frontline Performance Lea		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.13		

Full Name (Last, First, Middle Initial) C. JOHN G SINNICKI		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 2117 CARROLL CREEK VIEW CT		Transaction ID: A2006-976622	
City State Zip Code FREDERICK MD 21702	Amount of Each Receipt this Period 19.37		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Frontline Performance Lea		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.50		

SUBTOTAL of Receipts This Page (optional) ▶	65.25
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 202 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DAVID N SITZ		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 519A CHICAGO AVE.		Transaction ID: A2006-975325	
City EVANSTON	State IL	Zip Code 60202	Amount of Each Receipt this Period 25.07
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Associate Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.44		

Full Name (Last, First, Middle Initial) B. DAVID N SITZ		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 519A CHICAGO AVE.		Transaction ID: A2006-976683	
City EVANSTON	State IL	Zip Code 60202	Amount of Each Receipt this Period 25.07
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Associate Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.51		

Full Name (Last, First, Middle Initial) C. KEVIN R SLAWIN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1316 CRESTWOOD DRIVE		Transaction ID: A2006-975440	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 39.03
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation VP AF Admin Serv		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.71		

SUBTOTAL of Receipts This Page (optional)	89.17
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 203 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KEVIN R SLAWIN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1316 CRESTWOOD DRIVE		Transaction ID: A2006-976783	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 39.03
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation VP AF Admin Serv		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.74		

Full Name (Last, First, Middle Initial) B. KIMBERLY J SLOANE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 378 N. VISTA AVE		Transaction ID: A2006-975419	
City LOMBARD	State IL	Zip Code 60148	Amount of Each Receipt this Period 36.26
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Reserve Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 428.82		

Full Name (Last, First, Middle Initial) C. KIMBERLY J SLOANE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 378 N. VISTA AVE		Transaction ID: A2006-976763	
City LOMBARD	State IL	Zip Code 60148	Amount of Each Receipt this Period 36.26
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Reserve Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.08		

SUBTOTAL of Receipts This Page (optional) ▶	111.55
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 204 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. HUGH F SMART		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 222 N WISNER		Transaction ID: A2006-975152
City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 17.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Tax Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.70	

Full Name (Last, First, Middle Initial) B. HUGH F SMART		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 222 N WISNER		Transaction ID: A2006-976521
City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 17.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Tax Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.20	

Full Name (Last, First, Middle Initial) C. JOHN R SMITH		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address BOX 5916 RFD		Transaction ID: A2006-975232
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 50.55	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP-AGENCY & CUSTOMER SUP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 596.31	

SUBTOTAL of Receipts This Page (optional) ▶	85.55
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SUZANNE C SMITH		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1061 PRAIRIE AVENUE		Transaction ID: A2006-975386	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 27.33		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.92		

Full Name (Last, First, Middle Initial) B. J E SMITH		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 310 WHITMORE LANE		Transaction ID: A2006-975402	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 57.05		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation VP Distribution and Chann		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 669.97		

Full Name (Last, First, Middle Initial) C. JOHN R SMITH		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address BOX 5916 RFD		Transaction ID: A2006-976596	
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 50.55		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP-AGENCY & CUSTOMER SUP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 646.86		

SUBTOTAL of Receipts This Page (optional) ▶	134.93
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 206 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BENJAMIN M SMITH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1008 CHESAPEAK BLVD		Transaction ID: A2006-976604
City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 16.29	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.67	

Full Name (Last, First, Middle Initial) B. J E SMITH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 310 WHITMORE LANE		Transaction ID: A2006-976748
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 57.05	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP Distribution and Chann	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 727.02	

Full Name (Last, First, Middle Initial) C. RANDALL D SNITTJER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 11423 E. Blue Sky Drive		Transaction ID: A2006-975561
City State Zip Code Scottsdale AZ 85262	Amount of Each Receipt this Period 25.58	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.06	

SUBTOTAL of Receipts This Page (optional) ▶	98.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RANDALL D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City State Zip Code
Scottsdale AZ 85262

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

Name of Employer Allstate Insurance Company Occupation Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.64

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976891

Amount of Each Receipt this Period
25.58

B. Full Name (Last, First, Middle Initial)
STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 833.93

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975495

Amount of Each Receipt this Period
70.90

C. Full Name (Last, First, Middle Initial)
STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 904.83

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976831

Amount of Each Receipt this Period
70.90

SUBTOTAL of Receipts This Page (optional)	▶	167.38
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 208 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KEVIN A SPATARO		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1663 SARATOGA LANE		Transaction ID: A2006-975462	
City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 25.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Account Research		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.33		

Full Name (Last, First, Middle Initial) B. KEVIN A SPATARO		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1663 SARATOGA LANE		Transaction ID: A2006-976804	
City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 25.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Account Research		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.64		

Full Name (Last, First, Middle Initial) C. EDWIN M SPECHT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 740 AMBRIA DRIVE		Transaction ID: A2006-975211	
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 32.98		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.51		

SUBTOTAL of Receipts This Page (optional) ▶	83.60
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 209 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. EDWIN M SPECHT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 740 AMBRIA DRIVE		Transaction ID: A2006-976575	
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 32.98		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.49		

Full Name (Last, First, Middle Initial) B. JAMES G SPORLEDER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 20 LAKESIDE LANE		Transaction ID: A2006-975455	
City State Zip Code N. BARRINGTON IL 60010	Amount of Each Receipt this Period 25.90		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.81		

Full Name (Last, First, Middle Initial) C. JAMES G SPORLEDER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 20 LAKESIDE LANE		Transaction ID: A2006-976797	
City State Zip Code N. BARRINGTON IL 60010	Amount of Each Receipt this Period 25.90		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.71		

SUBTOTAL of Receipts This Page (optional) ▶	84.78
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 433.90

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975286

Amount of Each Receipt this Period
37.99

B. Full Name (Last, First, Middle Initial)
MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 471.89

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976647

Amount of Each Receipt this Period
37.99

C. Full Name (Last, First, Middle Initial)
EMORY D STEPHENS JR

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

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

Name of Employer Allstate Insurance Company Occupation AVP Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975239

Amount of Each Receipt this Period
37.38

SUBTOTAL of Receipts This Page (optional)	▶	113.36
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. EMORY D STEPHENS JR		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 4711 N WOLCOTT AVE		Transaction ID: A2006-976603	
City State Zip Code CHICAGO IL 60640	Amount of Each Receipt this Period 37.38		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.66		

Full Name (Last, First, Middle Initial) B. GARY S STERE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 2015 SELVA MADERA COURT		Transaction ID: A2006-975254	
City State Zip Code ATLANTIC BEACH FL 32233	Amount of Each Receipt this Period 35.78		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 422.91		

Full Name (Last, First, Middle Initial) C. GARY S STERE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 2015 SELVA MADERA COURT		Transaction ID: A2006-976618	
City State Zip Code ATLANTIC BEACH FL 32233	Amount of Each Receipt this Period 35.78		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.69		

SUBTOTAL of Receipts This Page (optional) ▶	108.94
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MYRON E STOUFFER		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 1528 JESSICA LANE		Transaction ID: A2006-975250
City LIBERTYVILLE	State IL	Zip Code 60048
Amount of Each Receipt this Period 18.81		
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP State Team	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.30	

Full Name (Last, First, Middle Initial) B. MYRON E STOUFFER		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006
Mailing Address 1528 JESSICA LANE		Transaction ID: A2006-976614
City LIBERTYVILLE	State IL	Zip Code 60048
Amount of Each Receipt this Period 18.81		
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP State Team	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.11	

Full Name (Last, First, Middle Initial) C. CHRISTINE A SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006
Mailing Address 257 BIG TERRA LANE		Transaction ID: A2006-975119
City GURNEE	State IL	Zip Code 60031
Amount of Each Receipt this Period 23.87		
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP PCCSO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 278.46	

SUBTOTAL of Receipts This Page (optional) ▶	61.49
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 213 / 263						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KEVIN T SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 221 CARRIAGE HILL CIR		Transaction ID: A2006-975573	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 91.08
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Corporate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1074.41		

Full Name (Last, First, Middle Initial) B. CHRISTINE A SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 257 BIG TERRA LANE		Transaction ID: A2006-976490	
City GURNEE	State IL	Zip Code 60031	Amount of Each Receipt this Period 23.87
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP PCCSO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.33		

Full Name (Last, First, Middle Initial) C. KEVIN T SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 221 CARRIAGE HILL CIR		Transaction ID: A2006-976903	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 91.08
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Corporate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1165.49		

SUBTOTAL of Receipts This Page (optional) ▶	206.03
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KATHLEEN A SWAIN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 242 HIGHVIEW		Transaction ID: A2006-975318	
City State Zip Code ELMHURST IL 60126		Amount of Each Receipt this Period 48.97	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Enterprise Applicatio	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 579.24	

Full Name (Last, First, Middle Initial) B. KATHLEEN A SWAIN		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 242 HIGHVIEW		Transaction ID: A2006-976677	
City State Zip Code ELMHURST IL 60126		Amount of Each Receipt this Period 48.97	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Enterprise Applicatio	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 628.21	

Full Name (Last, First, Middle Initial) C. CASEY J SYLLA		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 32 RIDERWOOD		Transaction ID: A2006-975493	
City State Zip Code BARRINGTON IL 60010		Amount of Each Receipt this Period 140.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation President Allstate Financ	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1652.07	

SUBTOTAL of Receipts This Page (optional) ▶	238.71
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 215 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CASEY J SYLLA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 32 RIDERWOOD		Transaction ID: A2006-976829	
City BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 140.77
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation President Allstate Financ		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1792.84		

Full Name (Last, First, Middle Initial) B. JERROLD S SZOSTAK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1064 W GLENN TRAIL		Transaction ID: A2006-975370	
City ELK GROVE	State IL	Zip Code 60007	Amount of Each Receipt this Period 36.51
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Reserve Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 433.32		

Full Name (Last, First, Middle Initial) C. JERROLD S SZOSTAK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1064 W GLENN TRAIL		Transaction ID: A2006-976722	
City ELK GROVE	State IL	Zip Code 60007	Amount of Each Receipt this Period 36.51
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Reserve Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 469.83		

SUBTOTAL of Receipts This Page (optional) ▶	213.79
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BENJAMIN A TARVER

Mailing Address 2495 EMERALD LANE

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation AVP Corporate Security

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 244.18

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975176

Amount of Each Receipt this Period
20.85

B. Full Name (Last, First, Middle Initial)
BENJAMIN A TARVER

Mailing Address 2495 EMERALD LANE

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation AVP Corporate Security

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.03

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976543

Amount of Each Receipt this Period
20.85

C. Full Name (Last, First, Middle Initial)
TIMOTHY J TAYLOR

Mailing Address 5314 RENEE AVE.

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.49

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975235

Amount of Each Receipt this Period
17.57

SUBTOTAL of Receipts This Page (optional)	▶	59.27
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 217 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JANICE M TAYLOR		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 7335 ATHLONE		Transaction ID: A2006-975544
City HOUSTON	State TX	Zip Code 77088
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 21.94	
Name of Employer Allstate Insurance Company	Occupation Frontline Performance Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.48	

Full Name (Last, First, Middle Initial) B. TIMOTHY J TAYLOR		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 5314 RENEE AVE.		Transaction ID: A2006-976599
City CRYSTAL LAKE	State IL	Zip Code 60014
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 17.57	
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.06	

Full Name (Last, First, Middle Initial) C. JANICE M TAYLOR		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 7335 ATHLONE		Transaction ID: A2006-976875
City HOUSTON	State TX	Zip Code 77088
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 21.94	
Name of Employer Allstate Insurance Company	Occupation Frontline Performance Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.42	

SUBTOTAL of Receipts This Page (optional)	61.45
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LINDSAY F TAYLOR

Mailing Address 217 E. SHERIDAN PLACE

City State Zip Code
LAKE BLUFF IL 60044

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976939

Amount of Each Receipt this Period
16.35

B. Full Name (Last, First, Middle Initial)
W. J THOMPSON

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.50

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975236

Amount of Each Receipt this Period
30.05

C. Full Name (Last, First, Middle Initial)
MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City State Zip Code
CHICAGO IL 60657

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

Name of Employer Allstate Insurance Company Occupation AVP-PRODUCT NON-STANDARD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 284.11

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975557

Amount of Each Receipt this Period
23.95

SUBTOTAL of Receipts This Page (optional)	▶	70.35
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 219 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. W. J THOMPSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1734 SHOAL CREEK TERRACE		Transaction ID: A2006-976600	
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 30.05		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.55		

Full Name (Last, First, Middle Initial) B. MARK L THOMPSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 3233 N RACINE #2		Transaction ID: A2006-976887	
City State Zip Code CHICAGO IL 60657	Amount of Each Receipt this Period 23.95		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP-PRODUCT NON-STANDARD		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.06		

Full Name (Last, First, Middle Initial) C. ROBERT J TIERNEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 6628 RFD-CARRIAGE WAY		Transaction ID: A2006-975336	
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Procurement Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.56		

SUBTOTAL of Receipts This Page (optional) ▶	73.88
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT J TIERNEY

Mailing Address 6628 RFD-CARRIAGE WAY

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation Procurement Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 258.44

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976692

Amount of Each Receipt this Period
19.88

B. Full Name (Last, First, Middle Initial)
LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP ENCOMPASS FIELD DISTR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 433.44

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975575

Amount of Each Receipt this Period
37.03

C. Full Name (Last, First, Middle Initial)
LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP ENCOMPASS FIELD DISTR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.47

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976905

Amount of Each Receipt this Period
37.03

SUBTOTAL of Receipts This Page (optional)	▶	93.94
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 221 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT E TRANSON		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 2644 N DOUGLAS		Transaction ID: A2006-975388	
City ARLINGTON HTS	State IL	Amount of Each Receipt this Period 26.32	
Zip Code 60004		Amount of Each Receipt this Period 26.32	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.32	
Name of Employer Allstate Insurance Company	Occupation AVP Strategic Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.29		

Full Name (Last, First, Middle Initial) B. ROBERT E TRANSON		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 2644 N DOUGLAS		Transaction ID: A2006-976734	
City ARLINGTON HTS	State IL	Amount of Each Receipt this Period 26.32	
Zip Code 60004		Amount of Each Receipt this Period 26.32	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.32	
Name of Employer Allstate Insurance Company	Occupation AVP Strategic Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.61		

Full Name (Last, First, Middle Initial) C. MICHAEL J TREVINO		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1840 N. SAINT ANDREW DR.		Transaction ID: A2006-975545	
City VERNON HILLS	State IL	Amount of Each Receipt this Period 30.46	
Zip Code 60061		Amount of Each Receipt this Period 30.46	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.46	
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 358.97		

SUBTOTAL of Receipts This Page (optional) ▶	83.10
TOTAL This Period (last page this line number only) ▶	83.10

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL J TREVINO		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1840 N. SAINT ANDREW DR.		Transaction ID: A2006-976876	
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 30.46		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.43		

Full Name (Last, First, Middle Initial) B. JOSEPH V TRIPODI		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 565 E DEERPATH RD		Transaction ID: A2006-975606	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 99.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1166.54		

Full Name (Last, First, Middle Initial) C. JOSEPH V TRIPODI		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 565 E DEERPATH RD		Transaction ID: A2006-976935	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 99.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.77		

SUBTOTAL of Receipts This Page (optional) ▶	228.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 223 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MELINDA S TUNNER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 5430 TALL OAKS DRIVE		Transaction ID: A2006-975530	
City State Zip Code LONG GROVE IL 60047		Amount of Each Receipt this Period 42.70	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Agency Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 494.97	

Full Name (Last, First, Middle Initial) B. MELINDA S TUNNER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 5430 TALL OAKS DRIVE		Transaction ID: A2006-976861	
City State Zip Code LONG GROVE IL 60047		Amount of Each Receipt this Period 42.70	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Agency Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 537.67	

Full Name (Last, First, Middle Initial) C. RICHARD D TURANO		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 4960 S CHESTER ST		Transaction ID: A2006-975154	
City State Zip Code ENGLEWOOD CO 80111		Amount of Each Receipt this Period 17.21	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.82	

SUBTOTAL of Receipts This Page (optional) ▶	102.61
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD D TURANO		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 4960 S CHESTER ST		Transaction ID: A2006-976523	
City State Zip Code ENGLEWOOD CO 80111	Amount of Each Receipt this Period 17.21		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.03		

Full Name (Last, First, Middle Initial) B. DAVID J UNROE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 326 ELM CT.		Transaction ID: A2006-975599	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.56		

Full Name (Last, First, Middle Initial) C. DAVID J UNROE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 326 ELM CT.		Transaction ID: A2006-976928	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.44		

SUBTOTAL of Receipts This Page (optional) ▶	56.97
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 225 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM A VAINISI		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 636 BALMORAL LANE		Transaction ID: A2006-975396 Amount of Each Receipt this Period 47.10
City INVERNESS	State Zip Code IL 60067	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.99	

Full Name (Last, First, Middle Initial) B. WILLIAM A VAINISI		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 636 BALMORAL LANE		Transaction ID: A2006-976742 Amount of Each Receipt this Period 47.10
City INVERNESS	State Zip Code IL 60067	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 598.09	

Full Name (Last, First, Middle Initial) C. HELEN K VAN DAAL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1300 LONGVALLEY RD.		Transaction ID: A2006-975322 Amount of Each Receipt this Period 18.04
City GLENVIEW	State Zip Code IL 60025	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.38	

SUBTOTAL of Receipts This Page (optional) ▶	112.24
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 226 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. HELEN K VAN DAAL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1300 LONGVALLEY RD.		Transaction ID: A2006-976680	
City State Zip Code GLENVIEW IL 60025		Amount of Each Receipt this Period 18.04	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Marketing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 229.42	

Full Name (Last, First, Middle Initial) B. JOHN W VAN ETTEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 519 DALHART RD.		Transaction ID: A2006-976789	
City State Zip Code ROMEOVILLE IL 60446		Amount of Each Receipt this Period 15.90	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Frontline Performance Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 206.60	

Full Name (Last, First, Middle Initial) C. KIMBERLY VAN NOSTERN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 660 PRESTWICK LANE #205		Transaction ID: A2006-975601	
City State Zip Code WHEELING IL 60090		Amount of Each Receipt this Period 23.60	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Information Security	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 276.06	

SUBTOTAL of Receipts This Page (optional) ▶	57.54
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KIMBERLY VAN NOSTERN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 660 PRESTWICK LANE #205		Transaction ID: A2006-976930
City State Zip Code WHEELING IL 60090	Amount of Each Receipt this Period 23.60	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Information Security	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.66	

Full Name (Last, First, Middle Initial) B. WILLIAM P VANDERBORG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 561 W CROOKED STICK CT		Transaction ID: A2006-975317
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 32.70	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.85	

Full Name (Last, First, Middle Initial) C. WILLIAM P VANDERBORG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 561 W CROOKED STICK CT		Transaction ID: A2006-976676
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 32.70	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 424.55	

SUBTOTAL of Receipts This Page (optional) ▶	89.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PATRICIA C VANLAMMEREN		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 9868 PALACE GREEN WAY		Transaction ID: A2006-975570	
City State Zip Code VIENNA VA 22181	Amount of Each Receipt this Period 51.82		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 610.57		

Full Name (Last, First, Middle Initial) B. PATRICIA C VANLAMMEREN		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 9868 PALACE GREEN WAY		Transaction ID: A2006-976900	
City State Zip Code VIENNA VA 22181	Amount of Each Receipt this Period 51.82		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Field		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 662.39		

Full Name (Last, First, Middle Initial) C. BILL VASILOGAMBROS		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1309 S. PINE AVE		Transaction ID: A2006-976812	
City State Zip Code ARLINGTON HTS. IL 60005	Amount of Each Receipt this Period 15.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.39		

SUBTOTAL of Receipts This Page (optional) ▶	119.52
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 229 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD VAVRA		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 2514 S WESLEY AVENUE		Transaction ID: A2006-975310	
City State Zip Code BERWYN IL 60402	Amount of Each Receipt this Period 37.52		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.79		

Full Name (Last, First, Middle Initial) B. RICHARD VAVRA		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 2514 S WESLEY AVENUE		Transaction ID: A2006-976669	
City State Zip Code BERWYN IL 60402	Amount of Each Receipt this Period 37.52		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 482.31		

Full Name (Last, First, Middle Initial) C. MICHAEL J VELOTTA		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 1111 LOYOLA DR		Transaction ID: A2006-975531	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 74.22		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Sec & Gene		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 876.08		

SUBTOTAL of Receipts This Page (optional) ▶	149.26
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL J VELOTTA		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 1111 LOYOLA DR		Transaction ID: A2006-976862	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 74.22		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Sec & Gene		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.30		

Full Name (Last, First, Middle Initial) B. STEVEN C VERNEY		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 37144 FOX HILL DR		Transaction ID: A2006-975171	
City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 64.83		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President & Treasure		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.32		

Full Name (Last, First, Middle Initial) C. STEVEN C VERNEY		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 37144 FOX HILL DR		Transaction ID: A2006-976539	
City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 64.83		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President & Treasure		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.15		

SUBTOTAL of Receipts This Page (optional) ▶	203.88
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHELLE K VIETH

Mailing Address 1731 PORTSMITH

City State Zip Code
ARLINGTON HGTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation Bank Cash Management Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 246.99

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975371

Amount of Each Receipt this Period
28.31

B. Full Name (Last, First, Middle Initial)
ROBERT D VOLLENHALS

Mailing Address 24682 MONTE ROYALE

City State Zip Code
LAGUNA HILLS CA 92653

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

Name of Employer Allstate Insurance Company Occupation Territory Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.42

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976921

Amount of Each Receipt this Period
16.34

C. Full Name (Last, First, Middle Initial)
MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City State Zip Code
CLOVIS CA 93611

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975277

Amount of Each Receipt this Period
28.43

SUBTOTAL of Receipts This Page (optional)	▶	73.08
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MADELINE J WALKER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 5140 N SAN JUAN AVE		Transaction ID: A2006-976638
City State Zip Code CLOVIS CA 93611	Amount of Each Receipt this Period 28.43	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.84	

Full Name (Last, First, Middle Initial) B. ANTON WANDERON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 112 BRISTOL PLACE		Transaction ID: A2006-975253
City State Zip Code PONTE VEDRA FL 32082	Amount of Each Receipt this Period 48.47	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation DIRECTOR CREDIT DEPARTMEN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 620.64	

Full Name (Last, First, Middle Initial) C. ANTON WANDERON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 112 BRISTOL PLACE		Transaction ID: A2006-976617
City State Zip Code PONTE VEDRA FL 32082	Amount of Each Receipt this Period 48.47	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation DIRECTOR CREDIT DEPARTMEN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 669.11	

SUBTOTAL of Receipts This Page (optional) ▶	125.37
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. THOMAS M WARDEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 146 LA GRANDE		Transaction ID: A2006-975269
City State Zip Code MOSS BEACH CA 94038	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.69
Name of Employer Allstate Insurance Company	Occupation AVP Research Center	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 356.17	

Full Name (Last, First, Middle Initial) B. THOMAS M WARDEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 146 LA GRANDE		Transaction ID: A2006-976631
City State Zip Code MOSS BEACH CA 94038	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.69
Name of Employer Allstate Insurance Company	Occupation AVP Research Center	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 386.86	

Full Name (Last, First, Middle Initial) C. EDWIN L WASINGER JR		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 6245 MURIFIELD DRIVE		Transaction ID: A2006-975467
City State Zip Code GURNEE IL 60031	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 33.09
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 387.68	

SUBTOTAL of Receipts This Page (optional)	▶	94.47
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. EDWIN L WASINGER JR		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 6245 MURIFIELD DRIVE		Transaction ID: A2006-976809
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 33.09	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.77	

Full Name (Last, First, Middle Initial) B. DOUGLAS B WELCH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1724 INDEPENDENCE AVE		Transaction ID: A2006-975298
City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 53.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 622.47	

Full Name (Last, First, Middle Initial) C. DOUGLAS B WELCH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1724 INDEPENDENCE AVE		Transaction ID: A2006-976658
City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 53.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.62	

SUBTOTAL of Receipts This Page (optional) ▶	139.39
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 235 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Senior Field Operations M

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 348.29

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975559

Amount of Each Receipt this Period
30.43

B. Full Name (Last, First, Middle Initial)
JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Senior Field Operations M

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.72

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976889

Amount of Each Receipt this Period
30.43

C. Full Name (Last, First, Middle Initial)
ROBERT J WHITE

Mailing Address 909 STILLWATER COURT

City State Zip Code
WESTON FL 33327

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 392.28

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975192

Amount of Each Receipt this Period
32.69

SUBTOTAL of Receipts This Page (optional) ▶ 93.55

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 236 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT J WHITE

Mailing Address 909 STILLWATER COURT

City WESTON State FL Zip Code 33327

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 424.97

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976557

Amount of Each Receipt this Period
32.69

B. Full Name (Last, First, Middle Initial)
SAMUEL W WHITEMAN

Mailing Address 120 NE STONELEDGE PLACE

City LEESBURG State VA Zip Code 20176

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 259.54

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 6

Transaction ID: A2006-975546

Amount of Each Receipt this Period
29.58

C. Full Name (Last, First, Middle Initial)
SAMUEL W WHITEMAN

Mailing Address 120 NE STONELEDGE PLACE

City LEESBURG State VA Zip Code 20176

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 289.12

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 6

Transaction ID: A2006-976877

Amount of Each Receipt this Period
29.58

SUBTOTAL of Receipts This Page (optional)	▶	91.85
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 237 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CYNTHIA A WHITFIELD

Mailing Address 135 CAMBRIDGE DR.

City State Zip Code
AURORA OH 44202

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

Name of Employer Allstate Insurance Company Occupation Risk Management Business

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 217.40

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975175

Amount of Each Receipt this Period
16.35

B. Full Name (Last, First, Middle Initial)
CYNTHIA A WHITFIELD

Mailing Address 135 CAMBRIDGE DR.

City State Zip Code
AURORA OH 44202

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

Name of Employer Allstate Insurance Company Occupation Risk Management Business

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 233.75

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976542

Amount of Each Receipt this Period
16.35

C. Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.10

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975238

Amount of Each Receipt this Period
35.80

SUBTOTAL of Receipts This Page (optional)	▶	68.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 238 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CYNTHIA R WHITLEY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 6722 NEW HAMPSHIRE TRAIL		Transaction ID: A2006-976602
City State Zip Code CRYSTAL LAKE IL 60012	Amount of Each Receipt this Period 35.80	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.90	

Full Name (Last, First, Middle Initial) B. ROB WHOLF		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 847 INTERLAKEN DRIVE		Transaction ID: A2006-975285
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 21.79	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.48	

Full Name (Last, First, Middle Initial) C. ROB WHOLF		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 847 INTERLAKEN DRIVE		Transaction ID: A2006-976646
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 21.79	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.27	

SUBTOTAL of Receipts This Page (optional) ▶	79.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 239 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN K WILCOX		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 1120 JESSICA LANE		Transaction ID: A2006-975335
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.33
Name of Employer Allstate Insurance Company	Occupation Product Operations Direct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 358.81	

Full Name (Last, First, Middle Initial) B. JOHN K WILCOX		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 1120 JESSICA LANE		Transaction ID: A2006-976691
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.33
Name of Employer Allstate Insurance Company	Occupation Product Operations Direct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.14	

Full Name (Last, First, Middle Initial) C. ANISE D WILEY-LITTLE		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 21030 W YORKSHIRE DR		Transaction ID: A2006-975576
City KILDEER	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.23
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.86	

SUBTOTAL of Receipts This Page (optional)	97.89
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 240 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANISE D WILEY-LITTLE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 21030 W YORKSHIRE DR		Transaction ID: A2006-976906
City KILDEER	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.23
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.09	

Full Name (Last, First, Middle Initial) B. JEFFREY W WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 7104 CHARDON COURT		Transaction ID: A2006-975377
City CLARKSVILLE	State MD	Zip Code 21029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.35
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 441.00	

Full Name (Last, First, Middle Initial) C. JEFFREY W WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 7104 CHARDON COURT		Transaction ID: A2006-976725
City CLARKSVILLE	State MD	Zip Code 21029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.35
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 478.35	

SUBTOTAL of Receipts This Page (optional)	111.93
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. THOMAS J WILSON		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 2024 N. MOHAWK		Transaction ID: A2006-975491
City CHICAGO	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.69
Name of Employer Allstate Insurance Company	Occupation President & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2255.79	

Full Name (Last, First, Middle Initial) B. THOMAS J WILSON		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 2024 N. MOHAWK		Transaction ID: A2006-976827
City CHICAGO	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.69
Name of Employer Allstate Insurance Company	Occupation President & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2448.48	

Full Name (Last, First, Middle Initial) C. DORETHA M WILSON-JOHNSON		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 3902 BLACKSTONE		Transaction ID: A2006-975514
City GURNEE	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.65
Name of Employer Allstate Insurance Company	Occupation Accounting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 692.59	

SUBTOTAL of Receipts This Page (optional)	406.03
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BRUCE A WOIKE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 1318 N. CHESTNUT AVE.		Transaction ID: A2006-975457
City State Zip Code ARLINGTON HTS. IL 60004	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Accounting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.41	

Full Name (Last, First, Middle Initial) B. BRUCE A WOIKE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 1318 N. CHESTNUT AVE.		Transaction ID: A2006-976799
City State Zip Code ARLINGTON HTS. IL 60004	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Accounting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.29	

Full Name (Last, First, Middle Initial) C. RHONDA WOODARD		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 2341 MARCY AVENUE		Transaction ID: A2006-975568
City State Zip Code EVANSTON IL 60201	Amount of Each Receipt this Period 34.21	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-PRODUCT DELIVERY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.52	

SUBTOTAL of Receipts This Page (optional) ▶	73.97
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RHONDA WOODARD

Mailing Address 2341 MARCY AVENUE

City State Zip Code
EVANSTON IL 60201

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

Name of Employer Allstate Insurance Company Occupation VP-PRODUCT DELIVERY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 437.73

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976898

Amount of Each Receipt this Period
34.21

B. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR

Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.75

Date of Receipt
M M / D D / Y Y Y Y
06 / 09 / 2006

Transaction ID: A2006-975340

Amount of Each Receipt this Period
33.35

C. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR

Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 424.10

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: A2006-976696

Amount of Each Receipt this Period
33.35

SUBTOTAL of Receipts This Page (optional)	▶	100.91
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 / 263
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. FLOYD M YAGER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1610 BIRCH LANE		Transaction ID: A2006-975418	
City PARK RIDGE	State IL	Zip Code 60068	Amount of Each Receipt this Period 45.25
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 527.95		

Full Name (Last, First, Middle Initial) B. FLOYD M YAGER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1610 BIRCH LANE		Transaction ID: A2006-976762	
City PARK RIDGE	State IL	Zip Code 60068	Amount of Each Receipt this Period 45.25
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 573.20		

Full Name (Last, First, Middle Initial) C. JERRY B YELVERTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 300 W WOODLAND		Transaction ID: A2006-975620	
City CARY	State IL	Zip Code 60013	Amount of Each Receipt this Period 49.11
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.82		

SUBTOTAL of Receipts This Page (optional)	139.61
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 245 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LORI J YELVINGTON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1531 N HIGHLAND AVE		Transaction ID: A2006-975426	
City State Zip Code ARLINGTON HGTS. IL 60004	Amount of Each Receipt this Period 43.86		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Procurement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 508.96		

Full Name (Last, First, Middle Initial) B. LORI J YELVINGTON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1531 N HIGHLAND AVE		Transaction ID: A2006-976770	
City State Zip Code ARLINGTON HGTS. IL 60004	Amount of Each Receipt this Period 43.86		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Procurement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 552.82		

Full Name (Last, First, Middle Initial) C. RICHARD P YOICIUS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 40135 N GOLDENROD		Transaction ID: A2006-975342	
City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 39.76		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 477.12		

SUBTOTAL of Receipts This Page (optional) ▶	127.48
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 246 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD P YOCIUS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 40135 N GOLDENROD		Transaction ID: A2006-976698	
City WADSWORTH	State IL	Zip Code 60083	Amount of Each Receipt this Period 39.76
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 516.88		

Full Name (Last, First, Middle Initial) B. PHILLIP C YOUNG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 2181 APPLE HILL LANE		Transaction ID: A2006-975383	
City BUFFALO GROVE	State IL	Zip Code 60089	Amount of Each Receipt this Period 17.39
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Director of Flight Operat		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.93		

Full Name (Last, First, Middle Initial) C. JAMES E YOUNG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1212 N. WELLS ST. APT. 1504		Transaction ID: A2006-976584	
City CHICAGO	State IL	Zip Code 60610	Amount of Each Receipt this Period 16.85
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.37		

SUBTOTAL of Receipts This Page (optional) ▶	74.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 247 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PHILLIP C YOUNG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 2181 APPLE HILL LANE		Transaction ID: A2006-976730	
City State Zip Code BUFFALO GROVE IL 60089	Amount of Each Receipt this Period 17.39		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Director of Flight Operat		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.32		

Full Name (Last, First, Middle Initial) B. RICHARD M ZAHARIAS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 1439 STEVENSON DRIVE		Transaction ID: A2006-975512	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 62.87		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Allstate Life Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 741.63		

Full Name (Last, First, Middle Initial) C. RICHARD M ZAHARIAS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1439 STEVENSON DRIVE		Transaction ID: A2006-976845	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 62.87		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Allstate Life Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 804.50		

SUBTOTAL of Receipts This Page (optional) ▶	143.13
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 / 263
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAUL K ZIGTERMAN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 236 SOUTH RIVERSIDE DRIVE		Transaction ID: A2006-975473
City State Zip Code VILLA PARK IL 60181	Amount of Each Receipt this Period 18.22	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.59	

Full Name (Last, First, Middle Initial) B. PAUL K ZIGTERMAN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 236 SOUTH RIVERSIDE DRIVE		Transaction ID: A2006-976815
City State Zip Code VILLA PARK IL 60181	Amount of Each Receipt this Period 18.22	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.81	

Full Name (Last, First, Middle Initial) C. JAMES P ZILS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 832 PADDOCK LANE		Transaction ID: A2006-975547
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 36.34	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP Investment Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 426.00	

SUBTOTAL of Receipts This Page (optional) ▶	72.78
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 249 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES P ZILS		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 832 PADDOCK LANE		Transaction ID: A2006-976878
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.34
Name of Employer Allstate Insurance Company	Occupation VP Investment Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.34	

Full Name (Last, First, Middle Initial) B. GERALD L ZIMMERMAN JR		Date of Receipt MM / DD / YYYY 06 / 09 / 2006
Mailing Address 2584 Sutton Lane		Transaction ID: A2006-975501
City AURORA	State IL	Zip Code 60502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.50
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

Full Name (Last, First, Middle Initial) C. GERALD L ZIMMERMAN JR		Date of Receipt MM / DD / YYYY 06 / 23 / 2006
Mailing Address 2584 Sutton Lane		Transaction ID: A2006-976835
City AURORA	State IL	Zip Code 60502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.50
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 439.50	

SUBTOTAL of Receipts This Page (optional)	105.34
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 250 / 263
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer
Allstate Insurance Company

Occupation
AVP HR People Planning &

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
396.33

Date of Receipt
MM / DD / YYYY
06 / 09 / 2006

Transaction ID: A2006-975565

Amount of Each Receipt this Period
33.78

B. Full Name (Last, First, Middle Initial)
J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer
Allstate Insurance Company

Occupation
AVP HR People Planning &

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.11

Date of Receipt
MM / DD / YYYY
06 / 23 / 2006

Transaction ID: A2006-976895

Amount of Each Receipt this Period
33.78

SUBTOTAL of Receipts This Page (optional)	▶	67.56
TOTAL This Period (last page this line number only)	▶	26390.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Fifth Third Bank		Transaction ID: B143990	
Mailing Address 346 West Carol Lane		Date of Disbursement MM / DD / YYYY 06 / 13 / 2006	
City Elmhurst	State IL	Zip Code 60062	Amount of Each Disbursement this Period 146.10
Purpose of Disbursement Bank Service Charge		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: IL	District:		

Full Name (Last, First, Middle Initial) B. Fifth Third Bank		Transaction ID: B143991	
Mailing Address 346 West Carol Lane		Date of Disbursement MM / DD / YYYY 06 / 13 / 2006	
City Elmhurst	State IL	Zip Code 60062	Amount of Each Disbursement this Period 0.05
Purpose of Disbursement Bank Service Charge		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: IL	District:		

SUBTOTAL of Disbursements This Page (optional) ►

146.15

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

146.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 252 / 263

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Judy Biggert for Congress		Transaction ID: B142266 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 1465 Stoddard Ave.		Amount of Each Disbursement this Period 1000.00
City Wheaton State IL Zip Code 60187	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 13 IL		
Candidate Name Judy Biggert		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sherman for Congress		Transaction ID: B142267 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address PO Box 75214		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20013	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 27 CA		
Candidate Name Brad Sherman		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Ray LaHood		Transaction ID: B142269 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 4238 N. Knoxville Ave.		Amount of Each Disbursement this Period 1000.00
City Peoria State IL Zip Code 61614	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 18 IL		
Candidate Name Ray LaHood		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ..... ▶	.....

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 253 / 263

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Jeff Fortenberry for U.S. Congress Full Name (Last, First, Middle Initial) Mailing Address 1610 N Street City Lincoln State NE Zip Code 68508 Purpose of Disbursement G-2006 U.S. House 01 NE Candidate Name Jeff Fortenberry Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 01 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B142270 Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2006 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
---	--	---

B. Adam Putnam for Congress Full Name (Last, First, Middle Initial) Mailing Address 3323 North Washington Blvd. City Arlington State VA Zip Code 22201 Purpose of Disbursement P-2006 U.S. House 12 FL Candidate Name Adam Putnam Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B142559 Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2006 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
--	--	---

C. Ed Royce for Congress Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2525 City Orange State CA Zip Code 92859 Purpose of Disbursement G-2006 U.S. House 40 CA Candidate Name Ed Royce Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B142560 Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2006 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
---	--	---

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 254 / 263

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Volunteers for Shimkus		Transaction ID: B142561 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6
Mailing Address P.O. Box 2776		Amount of Each Disbursement this Period 500.00
City Arlington State VA Zip Code 22202	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 19 IL		
Candidate Name John M Shimkus		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Adrian Smith for Congress		Transaction ID: B142562 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6
Mailing Address 3323 N. Washington Blvd.		Amount of Each Disbursement this Period 500.00
City Arlington State VA Zip Code 22201	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 3 NE		
Candidate Name Adrian Smith		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Manzullo for Congress		Transaction ID: B142904 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address P.O. Box 7783		Amount of Each Disbursement this Period 2000.00
City Rockford State IL Zip Code 61126	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 16 IL		
Candidate Name Donald Manzullo		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 255 / 263

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Meeks for Congress		Transaction ID: B142905 Date of Disbursement 06 / 13 / 2006
Mailing Address 219-10 South Conduit Ave.		Amount of Each Disbursement this Period 1000.00
City Springfield Garden State NY Zip Code 11413	Purpose of Disbursement P-2006 U.S. House 06 NY Category/Type 011	
Candidate Name Gregory W Meeks Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 06 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Pryce for Congress		Transaction ID: B142906 Date of Disbursement 06 / 13 / 2006
Mailing Address 145 E Rich Street		Amount of Each Disbursement this Period 1000.00
City Columbus State OH Zip Code 43215	Purpose of Disbursement G-2006 U.S. House 15 OH Category/Type 011	
Candidate Name Deborah Pryce Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Brad Miller for Congress		Transaction ID: B142907 Date of Disbursement 06 / 13 / 2006
Mailing Address 499 S. Capitol St. SW Suite 604		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement G-2006 U.S. House 13 NC Category/Type 011	
Candidate Name Brad (Ralph Bradley) Miller Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 256 / 263

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Judy Biggert for Congress		Transaction ID: B142992 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6	
Mailing Address 1465 Stoddard Ave.		Amount of Each Disbursement this Period 1000.00	
City Wheaton State IL Zip Code 60187	Purpose of Disbursement G-2006 U.S. House 13 IL	011 Category/Type	
Candidate Name Judy Biggert	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 13		

Full Name (Last, First, Middle Initial) B. Mark Pryor for US Senate		Transaction ID: B143506 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 420 C Street NE		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement G-2008 U.S. Senate AR	011 Category/Type	
Candidate Name Mark Pryor	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AR District:		

Full Name (Last, First, Middle Initial) C. Ed Royce for Congress		Transaction ID: B143740 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6	
Mailing Address P.O. Box 2525		Amount of Each Disbursement this Period 1000.00	
City Orange State CA Zip Code 92859	Purpose of Disbursement G-2006 U.S. House 40 CA	011 Category/Type	
Candidate Name Ed Royce	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 40		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ..... ▶	.....

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Melissa Bean for Congress		Transaction ID: B143741 Date of Disbursement 06 / 28 / 2006
Mailing Address PO Box 3068		Amount of Each Disbursement this Period 1000.00
City Barrington	State IL Zip Code 60011	
Purpose of Disbursement G-2006 U.S. House 08 IL		
Candidate Name Melissa Bean		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 08		

Full Name (Last, First, Middle Initial) B. Friends of Dick Lugar Inc.		Transaction ID: B139899 Date of Disbursement 04 / 13 / 2006
Mailing Address 47 S Meridian St Suite 200		Amount of Each Disbursement this Period 1000.00
City Indianapolis	State IN Zip Code 46204	
Purpose of Disbursement P-2006 U.S. Senate IN		
Candidate Name Richard G Lugar		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District:		[MEMO ITEM] As disclosed in 2006 May Monthly

Full Name (Last, First, Middle Initial) C. Friends of Dick Lugar Inc.		Transaction ID: B139899A Date of Disbursement 06 / 14 / 2006
Mailing Address 47 S Meridian St Suite 200		Amount of Each Disbursement this Period 1000.00
City Indianapolis	State IN Zip Code 46204	
Purpose of Disbursement G-2006 U.S. Senate IN		
Candidate Name Richard G Lugar		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District:		[MEMO ITEM] Redesignation of above contribution

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	17000.00

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ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Catania 2006		Transaction ID: B142898 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 2122 Newport Place NW		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20037	011 Category/ Type	
Purpose of Disbursement G-2006 City Council District of Columbia		
Candidate Name David Catania		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Committee to Elect James A. DeLeo		Transaction ID: B142899 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 6839 West Belmont Avenue		Amount of Each Disbursement this Period 1000.00
City Chicago State IL Zip Code 60634	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 10 IL		
Candidate Name James A Deleo		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens for Cheryl Axley		Transaction ID: B142900 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 121 S. Emerson Street		Amount of Each Disbursement this Period 1000.00
City Mt. Prospect State IL Zip Code 60056	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 33 IL		
Candidate Name Cheryl Axley		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 33	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Citizens for John Cullerton		Transaction ID: B142901 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 4004 Old Mill Lane		Amount of Each Disbursement this Period 2000.00
City Springfield State IL Zip Code 62707	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 06 IL		
Candidate Name John J Cullerton		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens for Peterson Campaign Cmte		Transaction ID: B142902 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 514 Longfield Lane		Amount of Each Disbursement this Period 1000.00
City Grayslake State IL Zip Code 60030	011 Category/ Type	
Purpose of Disbursement P-2008 State Senate 26 IL		
Candidate Name William Peterson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 26	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens for JoAnn Osmond		Transaction ID: B142903 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address PO Box 635		Amount of Each Disbursement this Period 500.00
City Antioch State IL Zip Code 60002	011 Category/ Type	
Purpose of Disbursement G-2006 State House 61 IL		
Candidate Name Joann Osmond		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 61	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Plescia for Assembly 06 ID#1272598		Transaction ID: B142989 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6	
Mailing Address 8130 La Mesa Blvd. #202		Amount of Each Disbursement this Period 1650.00	
City La Mesa State CA Zip Code 91941	Purpose of Disbursement G-2006 State House 75 CA	011 Category/Type	
Candidate Name George A. Plescia	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 75		

Full Name (Last, First, Middle Initial) B. Taxpayers for Dave Cogdill ID# 1273125		Transaction ID: B142990 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6	
Mailing Address 1127 11th Street Suite 310		Amount of Each Disbursement this Period 1000.00	
City Sacramento State CA Zip Code 95814	Purpose of Disbursement G-2006 State Senate 14 CA	011 Category/Type	
Candidate Name David Cogdill	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 14		

Full Name (Last, First, Middle Initial) C. Lieber for Assembly 2006 ID# 1272076		Transaction ID: B142991 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6	
Mailing Address 2005 N. Street		Amount of Each Disbursement this Period 1000.00	
City Sacramento State CA Zip Code 95814	Purpose of Disbursement G-2006 State House 22 CA	011 Category/Type	
Candidate Name Sally Lieber	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 22		

SUBTOTAL of Disbursements This Page (optional) ▶	3650.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Daucher for Senate 2006 ID# 1282193		Transaction ID: B143507 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address P.O. Box 1565		Amount of Each Disbursement this Period 1000.00
City Oakdale State CA Zip Code 95361	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 34 CA		
Candidate Name Lynn Daucher		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 34	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeff Denham for Senate 2006 ID#1251652		Transaction ID: B143508 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 2150 River Plaza Dr. #150		Amount of Each Disbursement this Period 1500.00
City Oakdale State CA Zip Code 95833	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 12 CA		
Candidate Name Jeff Denham		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Casey Cagle for Lieutenant Governor		Transaction ID: B143591 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 489		Amount of Each Disbursement this Period 2500.00
City Oakwood State GA Zip Code 30566	011 Category/ Type	
Purpose of Disbursement P-2006 Lt. Governor GA		
Candidate Name L.S. Casey Cagle		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. The Doug La Malfa Committee		Transaction ID: B143592 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6	
Mailing Address P.O. Box 984		Amount of Each Disbursement this Period 1500.00	
City Willows State CA Zip Code 95988	Purpose of Disbursement G-2006 State House 02 CA Candidate Name Doug La Malfa	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Citizens for Frank Watson		Transaction ID: B143593 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6	
Mailing Address 1355 S. State Route 127		Amount of Each Disbursement this Period 1000.00	
City Greenville State IL Zip Code 62246	Purpose of Disbursement G-2006 State Senate 51 IL Candidate Name Frank C Watson	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 51	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Russ Bogh Leadership Cmte. ID# 1273784		Transaction ID: B143742 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6	
Mailing Address P.O. Box 1565		Amount of Each Disbursement this Period 1650.00	
City Oakdale State CA Zip Code 95361	Purpose of Disbursement P-2008 State Senate 37 CA Candidate Name Russ Bogh	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 37	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4150.00
TOTAL This Period (last page this line number only) ▶	18800.00

Form/Schedule: SA11A1

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.