

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Allstate Insurance Company PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="36833.08"/>	<input type="text" value="36833.08"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="28995.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="22125.58"/>	<input type="text" value="42438.97"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="51121.57"/>	<input type="text" value="79272.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15306.07"/>	<input type="text" value="43456.55"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="35815.50"/>	<input type="text" value="35815.50"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Allstate Insurance Company PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8008.63	9920.16
(ii) Unitemized	14116.95	32518.81
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22125.58	42438.97
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	22125.58	42438.97
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	22125.58	42438.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	22125.58	42438.97

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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	146.07	296.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	146.07	296.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14500.00	42500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	660.00	660.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15306.07	43456.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15306.07	43456.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	22125.58	42438.97
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22125.58	42438.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	146.07	296.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	146.07	296.55

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 37
	<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. SHAWN L BROADFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 1044 APPLE BLOSSOM COURT

City LAKE ZURICH State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation VP-CLM-Claims Technical E

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **214.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : A2015-341139

Amount of Each Receipt this Period
53.59

B. GREGORY C BURNS
Full Name (Last, First, Middle Initial)

Mailing Address 2000 N. BROADMOOR LANE

City VERNON HILLS State IL Zip Code 60061

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

Name of Employer Allstate Insurance Company Occupation SVP-HR-Client Partnership

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : A2015-341070

Amount of Each Receipt this Period
58.85

C. ALICE M BYRNE
Full Name (Last, First, Middle Initial)

Mailing Address 4121 109TH STREET

City PLEASANT PRAIRI State WI Zip Code 53158

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

Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.87**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 06 / 2015

Transaction ID : A2015-253308

Amount of Each Receipt this Period
90.29

SUBTOTAL of Receipts This Page (optional)..... ▶ **202.73**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI
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.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 37
	(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"/> 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. ALICE M BYRNE

Mailing Address 4121 109TH STREET

City Pleasant PRAIRI State WI Zip Code 53158

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

Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **361.16**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : A2015-341223

Amount of Each Receipt this Period
90.29

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

Mailing Address 809 DUNHILL COURT

City GURNEE State IL Zip Code 60031

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

Name of Employer Allstate Insurance Company Occupation VP-LGL-Public Policy Deve

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **207.68**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : A2015-341131

Amount of Each Receipt this Period
51.92

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

Mailing Address 28852 FOREST LAKE LANE

City GREEN OAKS State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation SVP-ATO-Group CIO Persona

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.08**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 06 / 2015

Transaction ID : A2015-253124

Amount of Each Receipt this Period
69.36

SUBTOTAL of Receipts This Page (optional)..... **211.57**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 37
	<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. PETER T CORRIGAN
Full Name (Last, First, Middle Initial)

Mailing Address 28852 FOREST LAKE LANE

City GREEN OAKS State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation SVP-ATO-Group CIO Persona

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 277.44

Date of Receipt 02 / 20 / 2015
Transaction ID : A2015-341040

Amount of Each Receipt this Period 69.36

B. RICHARD C CRIST Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 3227 Meadow Lane

City Collegeville State PA Zip Code 19426

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

Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.25

Date of Receipt 02 / 06 / 2015
Transaction ID : A2015-253159

Amount of Each Receipt this Period 76.75

C. RICHARD C CRIST Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 3227 Meadow Lane

City Collegeville State PA Zip Code 19426

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

Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 307.00

Date of Receipt 02 / 20 / 2015
Transaction ID : A2015-341075

Amount of Each Receipt this Period 76.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 222.86

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 37
	<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 F DEIGL		Date of Receipt MM / DD / YYYY 02 / 20 / 2015 Transaction ID : A2015-341198
Mailing Address 453 PRAIRIE		Amount of Each Receipt this Period 57.20
City ELMHURST	State IL	Zip Code 60126
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-PRD-Product Vice Presi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.80	

Full Name (Last, First, Middle Initial) B. Victoria A Dinges		Date of Receipt MM / DD / YYYY 02 / 20 / 2015 Transaction ID : A2015-341284
Mailing Address 421 Chapel Hill Lane		Amount of Each Receipt this Period 65.52
City Northfield	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation SVP-CR-Ent. Social Resp.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.08	

Full Name (Last, First, Middle Initial) C. Thomas V Ealy		Date of Receipt MM / DD / YYYY 02 / 06 / 2015 Transaction ID : A2015-253384
Mailing Address 2601 N. Greenview Ave.		Amount of Each Receipt this Period 82.99
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation SVP-B2B-President, Encomp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.97	

SUBTOTAL of Receipts This Page (optional).....▶	205.71
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 37
	<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. Thomas V Ealy

Mailing Address 2601 N. Greenview Ave.

City Chicago State IL Zip Code 60614

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

Name of Employer Allstate Insurance Company Occupation SVP-B2B-President, Encomp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **331.96**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : A2015-341299

Amount of Each Receipt this Period
82.99

Full Name (Last, First, Middle Initial)
B. KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City CHICAGO State IL Zip Code 60655

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

Name of Employer Allstate Insurance Company Occupation VP-FSS-Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.40**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : A2015-341190

Amount of Each Receipt this Period
53.85

Full Name (Last, First, Middle Initial)
C. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City INVERNESS State IL Zip Code 60067

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

Name of Employer Allstate Insurance Company Occupation VP-HR-Diversity & Org. Ef

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.40**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : A2015-341043

Amount of Each Receipt this Period
58.85

SUBTOTAL of Receipts This Page (optional).....▶	195.69
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 37
	<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. ANGELA K FONTANA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1280 WILD ROSE LANE
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-LGL-Allstate Financial
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.32

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341245
 Amount of Each Receipt this Period
 54.33

B. GEORGE F GRAWE
 Full Name (Last, First, Middle Initial)
 Mailing Address 801 N. Vail Avenue
 City Arlington Heights State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-LGL-Staff & Retained C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.20

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341098
 Amount of Each Receipt this Period
 53.80

C. Mark A Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 1711 Wildwood Ct
 City Glenview State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-B2B-President, Ivanta
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341292
 Amount of Each Receipt this Period
 65.72

SUBTOTAL of Receipts This Page (optional).....▶	173.85
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 37
<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. JUDITH P GREFFIN
Full Name (Last, First, Middle Initial)
Mailing Address 338 North Kenilworth

City OAK PARK	State IL	Zip Code 60302
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation EVP-INV-Chief Investment	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.93	

Date of Receipt
MM / DD / YYYY
02 / 06 / 2015
Transaction ID : A2015-253189

Amount of Each Receipt this Period
77.31

B. JUDITH P GREFFIN
Full Name (Last, First, Middle Initial)
Mailing Address 338 North Kenilworth

City OAK PARK	State IL	Zip Code 60302
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation EVP-INV-Chief Investment	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.24	

Date of Receipt
MM / DD / YYYY
02 / 20 / 2015
Transaction ID : A2015-341105

Amount of Each Receipt this Period
77.31

C. Sanjay Gupta
Full Name (Last, First, Middle Initial)
Mailing Address 1971 Farnsworth Ln

City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation EVP-Mktg, Innovation & Co	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.60	

Date of Receipt
MM / DD / YYYY
02 / 20 / 2015
Transaction ID : A2015-341312

Amount of Each Receipt this Period
64.15

SUBTOTAL of Receipts This Page (optional).....▶	218.77
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. David S Harper
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Lancaster Lane
 City Lincolnshire State IL Zip Code 60069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-FSS-Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253379
 Amount of Each Receipt this Period
 67.20

B. David S Harper
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Lancaster Lane
 City Lincolnshire State IL Zip Code 60069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-FSS-Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341294
 Amount of Each Receipt this Period
 67.20

C. Cheryl A Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 4136 Three Lakes Drive
 City Long Grove State IL Zip Code 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SPS-Sourcing & Procur
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 258.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341306
 Amount of Each Receipt this Period
 64.62

SUBTOTAL of Receipts This Page (optional)..... ▶ 199.02
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. CHRISTY L HARRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 SO SUMMIT ST
 City WHEATON State IL Zip Code 60187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-HR-Total Compensation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015
Transaction ID : A2015-72891
 Amount of Each Receipt this Period
 250.00

B. HARRIET K HARTY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1112 Rose Street
 City PARK RIDGE State IL Zip Code 60068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-HR-Client Ptnrshp & H
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2015
Transaction ID : A2015-101261
 Amount of Each Receipt this Period
 500.00

C. James A Haskins
 Full Name (Last, First, Middle Initial)
 Mailing Address 511 Oak Knoll Road
 City Barrington State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SAL-Regional Presiden
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.14

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253393
 Amount of Each Receipt this Period
 100.38

SUBTOTAL of Receipts This Page (optional).....▶	850.38
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 37
(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

Full Name (Last, First, Middle Initial)
A. James A Haskins

Mailing Address 511 Oak Knoll Road

City State Zip Code
 Barrington IL 60010

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

Name of Employer Occupation
 Allstate Insurance Company SVP-SAL-Regional Presiden

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 401.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341308

Amount of Each Receipt this Period
 100.38

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

Mailing Address 2557 Kane Lane

City State Zip Code
 Batavia IL 60510

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

Name of Employer Occupation
 Allstate Insurance Company VP-SAL-Field Vice Preside

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 200.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341313

Amount of Each Receipt this Period
 50.77

Full Name (Last, First, Middle Initial)
C. WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
 LINDENHURST IL 60046

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

Name of Employer Occupation
 Allstate Insurance Company EVP-PRD-Regional Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 413.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253172

Amount of Each Receipt this Period
 137.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 288.84

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

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

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

<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 G HILL		Date of Receipt
Mailing Address 2935 GLENARYE DRIVE		M M M / D D D / Y Y Y Y Y Y 02 / 20 / 2015
City	State	Zip Code
LINDENHURST	IL	60046
FEC ID number of contributing federal political committee. C		Transaction ID : A2015-341088
Name of Employer Allstate Insurance Company		Amount of Each Receipt this Period
Occupation EVP-PRD-Regional Product		137.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	550.76	

Full Name (Last, First, Middle Initial) B. Wilford J Kavanaugh		Date of Receipt
Mailing Address 7 Open Parkway North		M M M / D D D / Y Y Y Y Y Y 02 / 20 / 2015
City	State	Zip Code
Hawthorn Woods	IL	60047
FEC ID number of contributing federal political committee. C		Transaction ID : A2015-341301
Name of Employer Allstate Insurance Company		Amount of Each Receipt this Period
Occupation SVP-AF-Pres. Allstate Fin		58.08
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	232.32	

Full Name (Last, First, Middle Initial) C. CHRISTOPHER R KIAH		Date of Receipt
Mailing Address 221 BRAMPTON LN		M M M / D D D / Y Y Y Y Y Y 02 / 20 / 2015
City	State	Zip Code
LAKE FOREST	IL	60045
FEC ID number of contributing federal political committee. C		Transaction ID : A2015-341035
Name of Employer Allstate Insurance Company		Amount of Each Receipt this Period
Occupation SVP-ST-Protection Program		59.08
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	235.57	

SUBTOTAL of Receipts This Page (optional).....▶	254.85
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. SUSAN L LEES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1950 Merritt Lane
 City Lake Forest State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-LGL-Gen'l Counsel & C
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **328.86**

Date of Receipt **02 / 06 / 2015**
Transaction ID : A2015-253117
 Amount of Each Receipt this Period **109.62**

B. SUSAN L LEES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1950 Merritt Lane
 City Lake Forest State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-LGL-Gen'l Counsel & C
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **438.48**

Date of Receipt **02 / 20 / 2015**
Transaction ID : A2015-341034
 Amount of Each Receipt this Period **109.62**

C. Peter G Logothetis
 Full Name (Last, First, Middle Initial)
 Mailing Address 2326 Indian Ridge Drive
 City Glenview State IL Zip Code 60026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-ATO-Bus Prtn-Claims
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.16**

Date of Receipt **02 / 20 / 2015**
Transaction ID : A2015-341302
 Amount of Each Receipt this Period **63.04**

SUBTOTAL of Receipts This Page (optional)..... **282.28**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 37
<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. Katherine A Mabe
 Full Name (Last, First, Middle Initial)
 Mailing Address 2750 Commons Drive
 City Glenview State IL Zip Code 60026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-B2B-President, Busine
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.76

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253385
 Amount of Each Receipt this Period
 111.92

B. Katherine A Mabe
 Full Name (Last, First, Middle Initial)
 Mailing Address 2750 Commons Drive
 City Glenview State IL Zip Code 60026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-B2B-President, Busine
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 447.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341300
 Amount of Each Receipt this Period
 111.92

C. CRAIG H MCCLURE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2507 PRINCETON AVE
 City EVANSTON State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Business Analyst-Exp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2015
Transaction ID : A2015-294019
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	473.84
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. Jesse E Merten
 Full Name (Last, First, Middle Initial)
 Mailing Address 76 Logan Loop
 City Highland Park State IL Zip Code 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-AF-Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253388
 Amount of Each Receipt this Period
 72.00

B. Jesse E Merten
 Full Name (Last, First, Middle Initial)
 Mailing Address 76 Logan Loop
 City Highland Park State IL Zip Code 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-AF-Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341303
 Amount of Each Receipt this Period
 72.00

C. DAVID G NADIG
 Full Name (Last, First, Middle Initial)
 Mailing Address 2950 LAKE PLACID
 City NORTHBROOK State IL Zip Code 60062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-LGL-Protection Law
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253284
 Amount of Each Receipt this Period
 66.72

SUBTOTAL of Receipts This Page (optional).....▶	210.72
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 21 OF 37
(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

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

Mailing Address 2950 LAKE PLACID

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation SVP-LGL-Protection Law

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 266.88

Date of Receipt
 02 / 20 / 2015
Transaction ID : A2015-341200

Amount of Each Receipt this Period
 66.72

Full Name (Last, First, Middle Initial)
B. PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City DEER PARK State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation SVP-LGL-Enterprise Busine

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 256.16

Date of Receipt
 02 / 20 / 2015
Transaction ID : A2015-341244

Amount of Each Receipt this Period
 64.04

Full Name (Last, First, Middle Initial)
C. PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City Hawthorn Woods State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation VP-CLM-Claims Product Lin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 204.12

Date of Receipt
 02 / 20 / 2015
Transaction ID : A2015-341100

Amount of Each Receipt this Period
 51.03

SUBTOTAL of Receipts This Page (optional)..... ▶ 181.79

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 37
	<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. LAWRENCE N PATTERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 64 RIVER DRIVE
 City ANNAPOLIS State MD Zip Code 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-99873
 Amount of Each Receipt this Period
 350.00

B. STEVEN A PETTI
 Full Name (Last, First, Middle Initial)
 Mailing Address 580 SALCEDA DR
 City MUNDELEIN State IL Zip Code 60060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-PF-Property & Casualty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341054
 Amount of Each Receipt this Period
 55.82

C. DAVID J PRENDERGAST
 Full Name (Last, First, Middle Initial)
 Mailing Address 8262 Arrowleaf Turn
 City Gainesville State VA Zip Code 20155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SAL-Regional Presiden
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253133
 Amount of Each Receipt this Period
 83.08

SUBTOTAL of Receipts This Page (optional).....▶	488.90
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 37
	<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. DAVID J PRENDERGAST
Full Name (Last, First, Middle Initial)
Mailing Address 8262 Arrowleaf Turn
City Gainesville State VA Zip Code 20155
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-SAL-Regional Presiden
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 332.32

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015
Transaction ID : A2015-341049
Amount of Each Receipt this Period
83.08

B. MARIO RIZZO
Full Name (Last, First, Middle Initial)
Mailing Address 5926 W. 90TH PLACE
City OAK LAWN State IL Zip Code 60453
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-APL-Chief Financial O
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 246.68

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015
Transaction ID : A2015-341148
Amount of Each Receipt this Period
61.67

C. Donald D Sands
Full Name (Last, First, Middle Initial)
Mailing Address 321 North Brainard Avenue
City Lagrange Park State IL Zip Code 60526
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-ST-Protection Project
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.16

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015
Transaction ID : A2015-341295
Amount of Each Receipt this Period
59.08

SUBTOTAL of Receipts This Page (optional).....▶	203.83
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 E SCHOLL		Date of Receipt
Mailing Address 7 COPPERFIELD DRIVE		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code
HAWTHORN WOODS	IL	60047
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2015-341071
Name of Employer	Occupation	Amount of Each Receipt this Period
Allstate Insurance Company	VP-HR-HR Business Partner	<input type="text" value="60.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. PAUL SCHUTT		Date of Receipt
Mailing Address 6323 N. NORMANDY		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code
CHICAGO	IL	60631
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2015-341147
Name of Employer	Occupation	Amount of Each Receipt this Period
Allstate Insurance Company	VP-INV-Finance	<input type="text" value="56.37"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.48"/>	

Full Name (Last, First, Middle Initial) C. DAVID J SCHWARTZER		Date of Receipt
Mailing Address 128 Waverly Circle		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code
Phoenixville	PA	19460
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2015-341226
Name of Employer	Occupation	Amount of Each Receipt this Period
Allstate Insurance Company	SVP-SAL-Field Senior Vice	<input type="text" value="54.82"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="219.28"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="171.19"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. STACY Y SHARPE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 N. Lake Shore Drive
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-CR-Strategic & Consum
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341173
 Amount of Each Receipt this Period
 55.73

B. STEVEN E SHEBIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 517 ROBINWOOD LANE
 City WHEATON State IL Zip Code 60189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-FSS-Chief Financial O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.24

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253238
 Amount of Each Receipt this Period
 173.08

C. STEVEN E SHEBIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 517 ROBINWOOD LANE
 City WHEATON State IL Zip Code 60189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-FSS-Chief Financial O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 692.32

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341154
 Amount of Each Receipt this Period
 173.08

SUBTOTAL of Receipts This Page (optional).....▶	401.89
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 37
	(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"/> 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. STEVEN P SORENSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 20712 High Ridge Dr
 City KILDEER State IL Zip Code 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-PRD-Product Operation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.86

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253306
 Amount of Each Receipt this Period
 94.62

B. STEVEN P SORENSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 20712 High Ridge Dr
 City KILDEER State IL Zip Code 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-PRD-Product Operation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 378.48

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341221
 Amount of Each Receipt this Period
 94.62

C. MARY SPRINGBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 4745 KINGS WAY - NORTH
 City GURNEE State IL Zip Code 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-ATO-Bus Prtn-Product O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.76

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341106
 Amount of Each Receipt this Period
 61.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.93
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 37
	<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. KATHLEEN A SWAIN
Full Name (Last, First, Middle Initial)

Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Occupation
Allstate Insurance Company SVP-FSS-Internal Auditing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.96

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015
Transaction ID : A2015-341118

Amount of Each Receipt this Period
64.49

B. WILLIAM J THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 5129 Pine River Trail

City State Zip Code
Castle Rock CO 80108

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

Name of Employer Occupation
Allstate Insurance Company SVP-SAL-Field Senior Vice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.36

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015
Transaction ID : A2015-341090

Amount of Each Receipt this Period
52.09

C. MELINDA S TUNNER
Full Name (Last, First, Middle Initial)

Mailing Address 190 West Johnson Street

City State Zip Code
Palatine IL 60067

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

Name of Employer Occupation
Allstate Insurance Company VP-SAL-Sales Programs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.44

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015
Transaction ID : A2015-341235

Amount of Each Receipt this Period
55.61

SUBTOTAL of Receipts This Page (optional)..... ▶ 172.19

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 37
	<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 A VAINISI		Date of Receipt
Mailing Address 636 BALMORAL LANE		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Transaction ID : A2015-341151
INVERNESS	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="64.93"/>
Name of Employer	Occupation	
Allstate Insurance Company	SVP-LGL-Government & Indu	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="259.72"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. PATRICIA C VANLAMMEREN		Date of Receipt
Mailing Address 2800 Birchwood Avenue		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Transaction ID : A2015-253340
Wilmette	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="71.79"/>
Name of Employer	Occupation	
Allstate Insurance Company	SVP-APL-Field Business Co	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="215.37"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. PATRICIA C VANLAMMEREN		Date of Receipt
Mailing Address 2800 Birchwood Avenue		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Transaction ID : A2015-341254
Wilmette	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="71.79"/>
Name of Employer	Occupation	
Allstate Insurance Company	SVP-APL-Field Business Co	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="287.16"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="208.51"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 29 OF 37
(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

Full Name (Last, First, Middle Initial)
A. STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City State Zip Code
 WADSWORTH IL 60083

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

Name of Employer Occupation
 Allstate Insurance Company EVP-FSS-Chief Risk Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 438.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253145

Amount of Each Receipt this Period
 146.15

Full Name (Last, First, Middle Initial)
B. STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City State Zip Code
 WADSWORTH IL 60083

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

Name of Employer Occupation
 Allstate Insurance Company EVP-FSS-Chief Risk Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 584.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2015
Transaction ID : A2015-341061

Amount of Each Receipt this Period
 146.15

Full Name (Last, First, Middle Initial)
C. Robert Wasserman

Mailing Address 1N165 Partridge Dr

City State Zip Code
 Wheaton IL 60188

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

Name of Employer Occupation
 Allstate Insurance Company SVP-MRK-eBusiness & Direc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 217.17

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : A2015-253378

Amount of Each Receipt this Period
 72.39

SUBTOTAL of Receipts This Page (optional)..... ▶ 364.69

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 Wasserman		Date of Receipt MM / DD / YYYY 02 / 20 / 2015 Transaction ID : A2015-341293
Mailing Address 1N165 Partridge Dr		Amount of Each Receipt this Period 72.39
City Wheaton	State IL	Zip Code 60188
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation SVP-MRK-eBusiness & Direc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.56	

Full Name (Last, First, Middle Initial) B. Mary P Weiss		Date of Receipt MM / DD / YYYY 02 / 06 / 2015 Transaction ID : A2015-253401
Mailing Address 5209 Westwood Drive		Amount of Each Receipt this Period 192.31
City Bethesda	State MD	Zip Code 20816
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-LGL-Legislative & Regu	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.93	

Full Name (Last, First, Middle Initial) C. Mary P Weiss		Date of Receipt MM / DD / YYYY 02 / 20 / 2015 Transaction ID : A2015-341316
Mailing Address 5209 Westwood Drive		Amount of Each Receipt this Period 192.31
City Bethesda	State MD	Zip Code 20816
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-LGL-Legislative & Regu	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.24	

SUBTOTAL of Receipts This Page (optional).....▶	457.01
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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
Mailing Address 2024 N. MOHAWK		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City CHICAGO	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A2015-253303
Name of Employer Allstate Insurance Company		Amount of Each Receipt this Period
Occupation CEO		<input type="text" value="265.38"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="796.14"/>		

Full Name (Last, First, Middle Initial) B. THOMAS J WILSON		Date of Receipt
Mailing Address 2024 N. MOHAWK		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City CHICAGO	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A2015-341218
Name of Employer Allstate Insurance Company		Amount of Each Receipt this Period
Occupation CEO		<input type="text" value="265.38"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="1061.52"/>		

Full Name (Last, First, Middle Initial) C. Matthew E Winter		Date of Receipt
Mailing Address 70 Ferncliff Drive		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City West Hartford	State CT	Zip Code 06117
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A2015-253382
Name of Employer Allstate Insurance Company		Amount of Each Receipt this Period
Occupation EVP-APL-Pres. Allstate Pe		<input type="text" value="184.62"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="550.39"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="715.38"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 37
	<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. Matthew E Winter

Mailing Address 70 Ferncliff Drive

City West Hartford State CT Zip Code 06117

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

Name of Employer Allstate Insurance Company Occupation EVP-APL-Pres. Allstate Pe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **735.01**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : A2015-341297

Amount of Each Receipt this Period
184.62

Full Name (Last, First, Middle Initial)
B. FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City PARK RIDGE State IL Zip Code 60068

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

Name of Employer Allstate Insurance Company Occupation SVP-APL-Chief Data Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **257.96**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : A2015-341168

Amount of Each Receipt this Period
64.49

Full Name (Last, First, Middle Initial)
C. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City AURORA State IL Zip Code 60502

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.15**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 06 / 2015

Transaction ID : A2015-253310

Amount of Each Receipt this Period
76.05

SUBTOTAL of Receipts This Page (optional)..... ▶ **325.16**

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

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

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

FOR LINE NUMBER: PAGE 33 OF 37
(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. GERALD L ZIMMERMAN JR
Full Name (Last, First, Middle Initial)
Mailing Address 2584 Sutton Lane
City AURORA State IL Zip Code 60502
FEC ID number of contributing federal political committee. C
Name of Employer Allstate Insurance Company Occupation Corporate Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 304.20

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2015
Transaction ID : A2015-341225
Amount of Each Receipt this Period
76.05

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	76.05
TOTAL This Period (last page this line number only).....▶	8008.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Gardner for Senate

Mailing Address 507 Capitol Court NE #100

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

011

Candidate Name

Cory Gardner

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2015

Transaction ID : B544516

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Ernst Victory

Mailing Address 2300 Clarendon Blvd. Suite 1306

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Contribution

011

Candidate Name

Joni Ernst

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2015

Transaction ID : B544519

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Dold for Congress

Mailing Address 1001 Pennsylvania Ave. NW Suite 13

City Washington State DC Zip Code 20004

Purpose of Disbursement
Contribution

011

Candidate Name

Bob Dold

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2015

Transaction ID : B544518

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Heidi for Senate

Mailing Address 420 C Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

011

Candidate Name

Heidi Heitkamp

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: ND District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : B545208

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Friends of Kelly Ayotte

Mailing Address 499 South Capitol Street SW Suite

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Kelly Ayotte

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 02 / 2015

Transaction ID : B544272

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Friends of Kelly Ayotte

Mailing Address 499 South Capitol Street SW Suite

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Kelly Ayotte

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 02 / 2015

Transaction ID : B544273

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of John Thune

Mailing Address PO Box 841

City State Zip Code
Sioux Falls SD 57101

Purpose of Disbursement
Contribution

011

Candidate Name
John Thune

Category/
Type

Office Sought: House
 Senate
 President
State: SD District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : B545206

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Friends of Jeb Hensarling

Mailing Address PO Box 820504

City State Zip Code
Dallas TX 75382

Purpose of Disbursement
Contribution

011

Candidate Name
Jeb Hensarling

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 05 / 2015

Transaction ID : B544513

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5000.00

14500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Representative Thomas D. Berry

Mailing Address P.O. Box 157

City Roundup State MT Zip Code 59072

Purpose of Disbursement
G-2014 State House 40 MT

011

Candidate Name

Thomas D Berry

Category/
Type

Office Sought: House
 Senate
 President
State: MT District: 40

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : B511299

Amount of Each Disbursement this Period

-170.00

Voided: Original check dated 09/05/14

Full Name (Last, First, Middle Initial)

B. Representative Steven J. Fitzpatrick

Mailing Address 3203 15th Avenue South

City Great Falls State MT Zip Code 59405

Purpose of Disbursement
G-2014 State House 20 MT

011

Candidate Name

Steven Fitzpatrick

Category/
Type

Office Sought: House
 Senate
 President
State: MT District: 20

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2015

Transaction ID : B511298

Amount of Each Disbursement this Period

-170.00

Voided: Original check dated 09/05/14

Full Name (Last, First, Middle Initial)

C. Friends of Don White

Mailing Address P.O. Box 363

City Indiana State PA Zip Code 15701

Purpose of Disbursement
P-2016 State Senate 41 PA

011

Candidate Name

Donald C White

Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 41

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2015

Transaction ID : B546346

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

660.00

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

660.00