

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		118846.25
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	116693.67									
(c) Total Receipts (from Line 19)	41843.22	69343.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	158536.89	188190.17								
7. Total Disbursements (from Line 31)	16148.54	45801.82								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	142388.35	142388.35								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

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	13582.64	14842.37
(i) Itemized (use Schedule A)	27759.25	53997.32
(ii) Unitemized	41341.89	68839.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	41341.89	68839.69
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)	500.00	500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.33	4.23
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 Transfer (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))	41843.22	69343.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	41843.22	69343.92

DETAILED SUMMARY PAGE
of Disbursements

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	148.54	301.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	148.54	301.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	41500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	4000.00	4000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	16148.54	45801.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16148.54	45801.82

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)	41341.89	68839.69
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41341.89	68839.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	148.54	301.82
37. Offsets to Operating Expenditures (from Line 15, page 3)	500.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-351.46	-198.18

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 6 / 75
(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

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) JOHN P BADER		Date of Receipt
	Mailing Address 438 MITCHELL DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 2 / 0 1 / 2 0 0 8
	City	State	Zip Code
	GRAYS LAKE	IL	60030
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-442319
Name of Employer Allstate Insurance Company		Occupation VP Enterprise Infrastruct	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 67.73
		<input type="text"/> 203.19	

B.	Full Name (Last, First, Middle Initial) JOHN P BADER		Date of Receipt
	Mailing Address 438 MITCHELL DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	GRAYS LAKE	IL	60030
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-431735
Name of Employer Allstate Insurance Company		Occupation VP Enterprise Infrastruct	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 67.73
		<input type="text"/> 270.92	

C.	Full Name (Last, First, Middle Initial) JOHN P BADER		Date of Receipt
	Mailing Address 438 MITCHELL DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	GRAYS LAKE	IL	60030
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-432163
Name of Employer Allstate Insurance Company		Occupation VP Enterprise Infrastruct	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 67.73
		<input type="text"/> 338.65	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 203.19
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 7 / 75
	<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) DIANE G BAKER		Date of Receipt
	Mailing Address 120 EAST SHERIDAN RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	LAKE BLUFF	IL	60044
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-432252
		Amount of Each Receipt this Period	<input type="text"/> 49.61
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 ▼	<input type="text"/> 248.05

B.	Full Name (Last, First, Middle Initial) ROBERT H BARGE III		Date of Receipt
	Mailing Address 2222 LOCH WAY		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	EL DORADO HILLS	CA	95762
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-432130
		Amount of Each Receipt this Period	<input type="text"/> 65.18
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 ▼	<input type="text"/> 260.72

C.	Full Name (Last, First, Middle Initial) ROBERT H BARGE III		Date of Receipt
	Mailing Address 2222 LOCH WAY		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	EL DORADO HILLS	CA	95762
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-432559
		Amount of Each Receipt this Period	<input type="text"/> 65.18
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 ▼	<input type="text"/> 325.90

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 179.97
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 8 / 75
	<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 BLOCK	Date of Receipt
	Mailing Address 398 Brookmont Lane	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 5 / 2 0 0 8
	City State Zip Code North Barrington IL 60010	Transaction ID: A2008-432046
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 59.62
	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 ▼ <input type="text"/> 238.48	

B.	Full Name (Last, First, Middle Initial) ROBERT L BLOCK	Date of Receipt
	Mailing Address 398 Brookmont Lane	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	City State Zip Code North Barrington IL 60010	Transaction ID: A2008-432475
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 59.62
	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 ▼ <input type="text"/> 298.10	

C.	Full Name (Last, First, Middle Initial) CHARLES A BOLLINGER	Date of Receipt
	Mailing Address 509 GATES HEAD SOUTH	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	City State Zip Code ELK GROVE VLLGE IL 60007	Transaction ID: A2008-432297
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 48.46
	Name of Employer Allstate Insurance Company Occupation Vice President Sales Agen Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 242.30	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 167.70
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 9 / 75
	<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) MICHAEL B BOYLE		Date of Receipt MM / DD / YYYY 02 / 01 / 2008		
	Mailing Address 1063 CHERRY STREET		Transaction ID: A2008-442391		
	City WINNETKA	State IL	Zip Code 60093	Amount of Each Receipt this Period 73.92	
	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 ▼ 221.76			

B.	Full Name (Last, First, Middle Initial) MICHAEL B BOYLE		Date of Receipt MM / DD / YYYY 02 / 15 / 2008		
	Mailing Address 1063 CHERRY STREET		Transaction ID: A2008-431807		
	City WINNETKA	State IL	Zip Code 60093	Amount of Each Receipt this Period 73.92	
	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 ▼ 295.68			

C.	Full Name (Last, First, Middle Initial) MICHAEL B BOYLE		Date of Receipt MM / DD / YYYY 02 / 29 / 2008		
	Mailing Address 1063 CHERRY STREET		Transaction ID: A2008-432235		
	City WINNETKA	State IL	Zip Code 60093	Amount of Each Receipt this Period 73.92	
	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 ▼ 369.60			

SUBTOTAL of Receipts This Page (optional)	▶	221.76
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 / 75
	<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) CATHERINE S BRUNE	Date of Receipt MM / DD / YYYY 02 / 01 / 2008
	Mailing Address 190 SAVANNA CT	Transaction ID: A2008-442411
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 173.08
	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 ▼ 519.24

B.	Full Name (Last, First, Middle Initial) CATHERINE S BRUNE	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 190 SAVANNA CT	Transaction ID: A2008-431827
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 173.08
	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 ▼ 692.32

C.	Full Name (Last, First, Middle Initial) CATHERINE S BRUNE	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 190 SAVANNA CT	Transaction ID: A2008-432255
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 173.08
	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 ▼ 865.40

SUBTOTAL of Receipts This Page (optional)	519.24
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 11 / 75

(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)
KAREN E BURCKHARDT

Mailing Address 730 E. HAWTHORNE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Occupation
Allstate Insurance Company AVP-Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 207.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432474

Amount of Each Receipt this Period

41.46

B.

Full Name (Last, First, Middle Initial)
CECILE A BUTLER

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

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

Name of Employer Occupation
Allstate Insurance Company AVP & Tax Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442307

Amount of Each Receipt this Period

86.76

C.

Full Name (Last, First, Middle Initial)
CECILE A BUTLER

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

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

Name of Employer Occupation
Allstate Insurance Company AVP & Tax Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 347.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431723

Amount of Each Receipt this Period

86.76

SUBTOTAL of Receipts This Page (optional) ▶

214.98

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 / 75
	<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) CECILE A BUTLER		Date of Receipt	
	Mailing Address 9309 ELIZABETH LANE		M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: A2008-432151
	SPRING GROVE	IL	60081	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		86.76	
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 ▼ 433.80		

B.	Full Name (Last, First, Middle Initial) D C BUTLER III		Date of Receipt	
	Mailing Address 15430 WHITE COLUMNS DRIVE		M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: A2008-431825
	ALPHARETTA	GA	30004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.73	
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 ▼ 210.92		

C.	Full Name (Last, First, Middle Initial) D C BUTLER III		Date of Receipt	
	Mailing Address 15430 WHITE COLUMNS DRIVE		M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: A2008-432253
	ALPHARETTA	GA	30004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.73	
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 ▼ 263.65		

SUBTOTAL of Receipts This Page (optional)	192.22
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 13 / 75
(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)
DEBORAH K CAMPBELL

Mailing Address 21863 NORTH TALL OAKS COURT

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.64

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-432031

Amount of Each Receipt this Period
60.41

B.

Full Name (Last, First, Middle Initial)
DEBORAH K CAMPBELL

Mailing Address 21863 NORTH TALL OAKS COURT

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.05

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432460

Amount of Each Receipt this Period
60.41

C.

Full Name (Last, First, Middle Initial)
RONALD L CORBIN

Mailing Address 14 Portrush Place

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.55

Date of Receipt
MM / DD / YYYY
02 / 01 / 2008

Transaction ID: A2008-442655

Amount of Each Receipt this Period
66.85

SUBTOTAL of Receipts This Page (optional) ► **187.67**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 75

(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)
RONALD L CORBIN

Mailing Address 14 Portrush Place

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 267.40

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-432070

Amount of Each Receipt this Period

66.85

B.

Full Name (Last, First, Middle Initial)
RONALD L CORBIN

Mailing Address 14 Portrush Place

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 334.25

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432499

Amount of Each Receipt this Period

66.85

C.

Full Name (Last, First, Middle Initial)
WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City State Zip Code
ARLINGTON HGTS. IL 60005

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

Name of Employer Occupation
Allstate Insurance Company Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.96

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442455

Amount of Each Receipt this Period

70.32

SUBTOTAL of Receipts This Page (optional) ▶

204.02

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: PAGE 15 / 75
(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)
WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City State Zip Code
ARLINGTON HGTS. IL 60005

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 ▼ 281.28

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-431870

Amount of Each Receipt this Period
70.32

B.

Full Name (Last, First, Middle Initial)
WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City State Zip Code
ARLINGTON HGTS. IL 60005

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 ▼ 351.60

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432298

Amount of Each Receipt this Period
70.32

C.

Full Name (Last, First, Middle Initial)
FREDERICK F CRIPE

Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
N. BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation GVP-Product Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.31

Date of Receipt
MM / DD / YYYY
02 / 01 / 2008

Transaction ID: A2008-442448

Amount of Each Receipt this Period
80.77

SUBTOTAL of Receipts This Page (optional) ► 221.41

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 / 75
(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)
FREDERICK F CRIPE

Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
N. BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation GVP-Product Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 323.08

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431864

Amount of Each Receipt this Period
80.77

B.

Full Name (Last, First, Middle Initial)
FREDERICK F CRIPE

Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
N. BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation GVP-Product Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.85

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432292

Amount of Each Receipt this Period
80.77

C.

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

Mailing Address 14 CARDINAL DRIVE

City State Zip Code
PRINCETON JUNCT NJ 08550

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.29

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442370

Amount of Each Receipt this Period
68.43

SUBTOTAL of Receipts This Page (optional) ► 229.97

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 17 / 75
(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)
RICHARD C CRIST JR

Mailing Address 14 CARDINAL DRIVE

City State Zip Code
PRINCETON JUNCT NJ 08550

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 273.72

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431786

Amount of Each Receipt this Period
68.43

B.

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

Mailing Address 14 CARDINAL DRIVE

City State Zip Code
PRINCETON JUNCT NJ 08550

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.15

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432214

Amount of Each Receipt this Period
68.43

C.

Full Name (Last, First, Middle Initial)
JOAN M CROCKETT

Mailing Address 27 RIVER BEND CT

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation SVP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.14

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442429

Amount of Each Receipt this Period
117.38

SUBTOTAL of Receipts This Page (optional) ► 254.24

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 18 / 75
(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)
JOAN M CROCKETT

Mailing Address 27 RIVER BEND CT

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation SVP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 469.52

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-431845

Amount of Each Receipt this Period
117.38

B.

Full Name (Last, First, Middle Initial)
JOAN M CROCKETT

Mailing Address 27 RIVER BEND CT

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation SVP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 586.90

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432273

Amount of Each Receipt this Period
117.38

C.

Full Name (Last, First, Middle Initial)
WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City State Zip Code
BARRINGTON IL 60010

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 ▼ 200.75

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432200

Amount of Each Receipt this Period
40.15

SUBTOTAL of Receipts This Page (optional) ▶ **274.91**

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 19 / 75
(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)
JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP Specialty Lines

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.88

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-432021

Amount of Each Receipt this Period
52.22

B.

Full Name (Last, First, Middle Initial)
JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP Specialty Lines

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.10

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432450

Amount of Each Receipt this Period
52.22

C.

Full Name (Last, First, Middle Initial)
SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP Northbrook/Glenbrook

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 223.80

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431997

Amount of Each Receipt this Period
55.95

SUBTOTAL of Receipts This Page (optional) ► **160.39**

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 20 / 75
(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)
SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP Northbrook/Glenbrook

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 279.75

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432426

Amount of Each Receipt this Period
55.95

B.

Full Name (Last, First, Middle Initial)
JOHN EDELEN

Mailing Address 1250 So Indiana - Unit 1309

City State Zip Code
Chicago IL 60605

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

Name of Employer Allstate Insurance Company Occupation AVP P-CCSO Strategy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.67

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432202

Amount of Each Receipt this Period
92.79

C.

Full Name (Last, First, Middle Initial)
PHILIP L EMMANUELE

Mailing Address 1085 FOREST HILL 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 Marketing Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-431754

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► 208.74

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 / 75

(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)
PHILIP L EMMANUELE

Mailing Address 1085 FOREST HILL RD.

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
Allstate Insurance Company AVP Marketing Management

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432182

Amount of Each Receipt this Period

60.00

B.

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

Mailing Address 660 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

Name of Employer Occupation
Allstate Insurance Company AVP Finance Innovation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431737

Amount of Each Receipt this Period

50.18

C.

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

Mailing Address 660 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

Name of Employer Occupation
Allstate Insurance Company AVP Finance Innovation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.90

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432165

Amount of Each Receipt this Period

50.18

SUBTOTAL of Receipts This Page (optional) ▶

160.36

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 22 / 75
(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)
THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City State Zip Code
BARRINGTON IL 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 ▼ 208.45

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432198

Amount of Each Receipt this Period
41.69

B.

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 ▼ 245.43

Date of Receipt
MM / DD / YYYY
02 / 01 / 2008

Transaction ID: A2008-442494

Amount of Each Receipt this Period
81.81

C.

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 ▼ 327.24

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-431909

Amount of Each Receipt this Period
81.81

SUBTOTAL of Receipts This Page (optional) ► 205.31

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 23 / 75
(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)
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 ▼ 409.05

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432337

Amount of Each Receipt this Period
81.81

B. 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 ▼ 229.95

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432359

Amount of Each Receipt this Period
45.99

C. Full Name (Last, First, Middle Initial)
PATRICIA W FRIDLEY

Mailing Address 945 Shermer Road

City State Zip Code
NORTHBROOK IL 60062

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 ▼ 222.93

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431853

Amount of Each Receipt this Period
74.31

SUBTOTAL of Receipts This Page (optional) ► 202.11

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 24 / 75
(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)
PATRICIA W FRIDLEY

Mailing Address 945 Shermer Road

City NORTHBROOK State IL Zip Code 60062

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 ▼ 297.24

Date of Receipt: 02 / 29 / 2008
Transaction ID: A2008-432281
 Amount of Each Receipt this Period: 74.31

B. Full Name (Last, First, Middle Initial)
PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

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 & Assistan

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.52

Date of Receipt: 02 / 15 / 2008
Transaction ID: A2008-431792
 Amount of Each Receipt this Period: 58.63

C. Full Name (Last, First, Middle Initial)
PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

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 & Assistan

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 293.15

Date of Receipt: 02 / 29 / 2008
Transaction ID: A2008-432220
 Amount of Each Receipt this Period: 58.63

SUBTOTAL of Receipts This Page (optional) ► 191.57

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 25 / 75
	<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) KAREN C GARDNER		Date of Receipt
	Mailing Address 1434 BAFFIN ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-442671
Name of Employer Allstate Insurance Company		Occupation Vice President Tax	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 68.18
		<input type="text"/> 204.54	

B.	Full Name (Last, First, Middle Initial) KAREN C GARDNER		Date of Receipt
	Mailing Address 1434 BAFFIN ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-432086
Name of Employer Allstate Insurance Company		Occupation Vice President Tax	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 68.18
		<input type="text"/> 272.72	

C.	Full Name (Last, First, Middle Initial) KAREN C GARDNER		Date of Receipt
	Mailing Address 1434 BAFFIN ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-432515
Name of Employer Allstate Insurance Company		Occupation Vice President Tax	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 68.18
		<input type="text"/> 340.90	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 204.54
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 26 / 75

(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)
MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
Allstate Insurance Company Vice President Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 213.03

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442561

Amount of Each Receipt this Period

71.01

B.

Full Name (Last, First, Middle Initial)
MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
Allstate Insurance Company Vice President Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 284.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431976

Amount of Each Receipt this Period

71.01

C.

Full Name (Last, First, Middle Initial)
MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
Allstate Insurance Company Vice President Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 355.05

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432405

Amount of Each Receipt this Period

71.01

SUBTOTAL of Receipts This Page (optional)

213.03

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 / 75
	<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) DENNIS C GOMEZ		Date of Receipt
	Mailing Address 3 ROBERT COURT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	HAWTHORN WOODS	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-431767
Name of Employer Allstate Insurance Company		Occupation Vice President Human Reso	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 237.88	59.47

B.	Full Name (Last, First, Middle Initial) DENNIS C GOMEZ		Date of Receipt
	Mailing Address 3 ROBERT COURT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	HAWTHORN WOODS	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-432195
Name of Employer Allstate Insurance Company		Occupation Vice President Human Reso	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 297.35	59.47

C.	Full Name (Last, First, Middle Initial) JUDITH P GREFFIN		Date of Receipt
	Mailing Address 948 NORTH EUCLID AVENUE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	OAK PARK	IL	60302
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-432285
Name of Employer Allstate Insurance Company		Occupation Senior Managing Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.75	46.15

SUBTOTAL of Receipts This Page (optional)	165.09
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 28 / 75
(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)
JAMES W HAIDU

Mailing Address 3 South Wynstone

City State Zip Code
N. BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Ivantage AVP Specialty Li

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.92

Date of Receipt / /
Transaction ID: A2008-431986
 Amount of Each Receipt this Period 52.23

B. Full Name (Last, First, Middle Initial)
JAMES W HAIDU

Mailing Address 3 South Wynstone

City State Zip Code
N. BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Ivantage AVP Specialty Li

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.15

Date of Receipt / /
Transaction ID: A2008-432415
 Amount of Each Receipt this Period 52.23

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 ▼ 421.83

Date of Receipt / /
Transaction ID: A2008-442639
 Amount of Each Receipt this Period 140.61

SUBTOTAL of Receipts This Page (optional) ► 245.07

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 29 / 75
(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)
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 ▼ 562.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-432054

Amount of Each Receipt this Period
140.61

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 ▼ 703.05

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432483

Amount of Each Receipt this Period
140.61

C.

Full Name (Last, First, Middle Initial)
MICHAEL L HARRISON

Mailing Address 1141 WINNERS CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼ 397.65

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442728

Amount of Each Receipt this Period
132.55

SUBTOTAL of Receipts This Page (optional) ► **413.77**

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: PAGE 30 / 75
(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)
MICHAEL L HARRISON

Mailing Address 1141 WINNERS CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼ 530.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	8

Transaction ID: A2008-432143

Amount of Each Receipt this Period
132.55

B.

Full Name (Last, First, Middle Initial)
MICHAEL L HARRISON

Mailing Address 1141 WINNERS CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼ 662.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	9	/	2	0	0	8

Transaction ID: A2008-432572

Amount of Each Receipt this Period
132.55

C.

Full Name (Last, First, Middle Initial)
DANIEL J HEBEL

Mailing Address 28365 West Big Hollow Road

City State Zip Code
Ingleside IL 60041

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 ▼ 260.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	8

Transaction ID: A2008-431848

Amount of Each Receipt this Period
65.02

SUBTOTAL of Receipts This Page (optional) ► **330.12**

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 31 / 75

(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)
DANIEL J HEBEL

Mailing Address 28365 West Big Hollow Road

City State Zip Code
Ingleside IL 60041

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

Name of Employer Occupation
Allstate Insurance Company Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.10

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432276

Amount of Each Receipt this Period

65.02

B.

Full Name (Last, First, Middle Initial)
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 Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 249.24

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442397

Amount of Each Receipt this Period

83.08

C.

Full Name (Last, First, Middle Initial)
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 Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 332.32

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431813

Amount of Each Receipt this Period

83.08

SUBTOTAL of Receipts This Page (optional)

231.18

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 32 / 75
(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)
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 Allstate Insurance Company Occupation Vice President Product

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 415.40

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432241

Amount of Each Receipt this Period
83.08

B. Full Name (Last, First, Middle Initial)
LINDA M HONOUR

Mailing Address 8 PELHAM ROAD

City State Zip Code
WESTON MA 02493

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

Name of Employer Allstate Insurance Company Occupation Assistant Vice President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.40

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432575

Amount of Each Receipt this Period
43.08

C. Full Name (Last, First, Middle Initial)
STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

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 ▼ 217.40

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432390

Amount of Each Receipt this Period
43.48

SUBTOTAL of Receipts This Page (optional) ► 169.64

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 / 75

(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)
MICHAEL A JACKOWSKI

Mailing Address 3602 FRANKLIN CT.

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 229.29

Date of Receipt M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442479

Amount of Each Receipt this Period 76.43

B.

Full Name (Last, First, Middle Initial)
MICHAEL A JACKOWSKI

Mailing Address 3602 FRANKLIN CT.

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.72

Date of Receipt M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431894

Amount of Each Receipt this Period 76.43

C.

Full Name (Last, First, Middle Initial)
MICHAEL A JACKOWSKI

Mailing Address 3602 FRANKLIN CT.

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 382.15

Date of Receipt M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432322

Amount of Each Receipt this Period 76.43

SUBTOTAL of Receipts This Page (optional) 229.29

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 34 / 75
(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)
JEFF L KAUFMAN

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
PARKER CO 80134

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.24

Date of Receipt
MM / DD / YYYY
02 / 01 / 2008

Transaction ID: A2008-442696

Amount of Each Receipt this Period
83.08

B.

Full Name (Last, First, Middle Initial)
JEFF L KAUFMAN

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
PARKER CO 80134

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 332.32

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-432111

Amount of Each Receipt this Period
83.08

C.

Full Name (Last, First, Middle Initial)
JEFF L KAUFMAN

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
PARKER CO 80134

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 415.40

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432540

Amount of Each Receipt this Period
83.08

SUBTOTAL of Receipts This Page (optional) ► 249.24

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 75
	<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) TERRY KELAHER		Date of Receipt
	Mailing Address 924 W. CHESTERFIELD CT.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 0 1 / 2 0 0 8
	City	State	Zip Code
	PALATINE	IL	60067
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-442542
Name of Employer Allstate Insurance Company		Occupation Vice President & General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 80.63
		<input type="text"/> 241.89	

B.	Full Name (Last, First, Middle Initial) TERRY KELAHER		Date of Receipt
	Mailing Address 924 W. CHESTERFIELD CT.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	PALATINE	IL	60067
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-431957
Name of Employer Allstate Insurance Company		Occupation Vice President & General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 80.63
		<input type="text"/> 322.52	

C.	Full Name (Last, First, Middle Initial) TERRY KELAHER		Date of Receipt
	Mailing Address 924 W. CHESTERFIELD CT.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	PALATINE	IL	60067
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-432386
Name of Employer Allstate Insurance Company		Occupation Vice President & General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 80.63
		<input type="text"/> 403.15	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 241.89
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 36 / 75

(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)
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 ▼ 215.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	9	/	2	0	0	8

Transaction ID: A2008-432153

Amount of Each Receipt this Period
43.12

B.

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 ▼ 201.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	1	/	2	0	0	8

Transaction ID: A2008-442530

Amount of Each Receipt this Period
67.29

C.

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 ▼ 269.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	8

Transaction ID: A2008-431945

Amount of Each Receipt this Period
67.29

SUBTOTAL of Receipts This Page (optional) 177.70

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 37 / 75
(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)
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 ▼ 336.45

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432374

Amount of Each Receipt this Period
67.29

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 ▼ 223.60

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432174

Amount of Each Receipt this Period
44.72

C. Full Name (Last, First, Middle Initial)
PHILLIP E LAWSON

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.12

Date of Receipt
MM / DD / YYYY
02 / 01 / 2008

Transaction ID: A2008-442684

Amount of Each Receipt this Period
73.04

SUBTOTAL of Receipts This Page (optional) ► **185.05**

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 38 / 75
(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
							17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
PHILLIP E LAWSON

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.16

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-432099

Amount of Each Receipt this Period
73.04

B.

Full Name (Last, First, Middle Initial)
PHILLIP E LAWSON

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.20

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432528

Amount of Each Receipt this Period
73.04

C.

Full Name (Last, First, Middle Initial)
CATHY A LAZAROFF

Mailing Address 910 S MICHIGAN AVE #1503

City State Zip Code
CHICAGO IL 60605

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 ▼ 230.28

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431733

Amount of Each Receipt this Period
57.57

SUBTOTAL of Receipts This Page (optional) ► 203.65

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 39 / 75
(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)
CATHY A LAZAROFF

Mailing Address 910 S MICHIGAN AVE #1503

City State Zip Code
CHICAGO IL 60605

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 ▼ 287.85

Date of Receipt: MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432161

Amount of Each Receipt this Period: 57.57

B. Full Name (Last, First, Middle Initial)
MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 233.80

Date of Receipt: MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-432141

Amount of Each Receipt this Period: 58.45

C. Full Name (Last, First, Middle Initial)
MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.25

Date of Receipt: MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432570

Amount of Each Receipt this Period: 58.45

SUBTOTAL of Receipts This Page (optional) ► 174.47

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 40 / 75

(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)
FELIX A MANTILLA

Mailing Address 28601 N. Sky Crest Drive

City State Zip Code
Ivanhoe IL 60060

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432480

Amount of Each Receipt this Period

47.10

B.

Full Name (Last, First, Middle Initial)
MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
BARRINGTON HILL IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 226.38

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442570

Amount of Each Receipt this Period

75.46

C.

Full Name (Last, First, Middle Initial)
MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
BARRINGTON HILL IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 301.84

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431985

Amount of Each Receipt this Period

75.46

SUBTOTAL of Receipts This Page (optional)

198.02

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: PAGE 41 / 75

(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)
MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
BARRINGTON HILL IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 377.30

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432414

Amount of Each Receipt this Period

75.46

B.

Full Name (Last, First, Middle Initial)
MICHAEL MCKINNEY

Mailing Address 1207 DEVENS DRIVE

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Occupation
Allstate Insurance Company Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.25

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432236

Amount of Each Receipt this Period

49.05

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 Occupation
Allstate Insurance Company Vice President Investor R

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.05

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432333

Amount of Each Receipt this Period

49.41

SUBTOTAL of Receipts This Page (optional) ▶

173.92

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 42 / 75
(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)
EDWARD J MORAN

Mailing Address 131 ADELAIDE UNIT 406

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP PCCSO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 243.15

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432226

Amount of Each Receipt this Period
48.63

B.

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 ▼ 242.70

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432452

Amount of Each Receipt this Period
48.54

C.

Full Name (Last, First, Middle Initial)
DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 326.40

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442469

Amount of Each Receipt this Period
108.80

SUBTOTAL of Receipts This Page (optional) ► 205.97

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 43 / 75

(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)
DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 435.20

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431884

Amount of Each Receipt this Period

108.80

B.

Full Name (Last, First, Middle Initial)
DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 544.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432312

Amount of Each Receipt this Period

108.80

C.

Full Name (Last, First, Middle Initial)
JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Vice President Procuremen

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 258.48

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432503

Amount of Each Receipt this Period

64.62

SUBTOTAL of Receipts This Page (optional) ▶

282.22

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 44 / 75

(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)
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 Occupation
Allstate Insurance Company AVP Public Relations Mana

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.04

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431992

Amount of Each Receipt this Period
52.51

B.

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 Occupation
Allstate Insurance Company AVP Public Relations Mana

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 262.55

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432421

Amount of Each Receipt this Period
52.51

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 Occupation
Allstate Insurance Company AVP Corporate Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.90

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432561

Amount of Each Receipt this Period
47.78

SUBTOTAL of Receipts This Page (optional) ▶

152.80

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 75
	<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) CHARLES PAUL	Date of Receipt MM / DD / YYYY 02 / 01 / 2008
	Mailing Address 301 CAMELOT LANE	Transaction ID: A2008-442371
	City LIBERTYVILLE State IL Zip Code 60048	Amount of Each Receipt this Period 71.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 214.62	

B.	Full Name (Last, First, Middle Initial) CHARLES PAUL	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 301 CAMELOT LANE	Transaction ID: A2008-431787
	City LIBERTYVILLE State IL Zip Code 60048	Amount of Each Receipt this Period 71.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 286.16	

C.	Full Name (Last, First, Middle Initial) CHARLES PAUL	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 301 CAMELOT LANE	Transaction ID: A2008-432215
	City LIBERTYVILLE State IL Zip Code 60048	Amount of Each Receipt this Period 71.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 357.70	

SUBTOTAL of Receipts This Page (optional)	214.62
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 46 / 75
(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)
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 ▼ 237.15

Date of Receipt: MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432179

Amount of Each Receipt this Period: 47.43

B. Full Name (Last, First, Middle Initial)
STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Allstate Insurance Company Occupation AVP Property & Casualty F

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 244.20

Date of Receipt: MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432178

Amount of Each Receipt this Period: 48.84

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

Mailing Address 2116 W CHURCHILL ST

City State Zip Code
CHICAGO IL 60647

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

Name of Employer Allstate Insurance Company Occupation Vice President Finance -

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.08

Date of Receipt: MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-431883

Amount of Each Receipt this Period: 65.52

SUBTOTAL of Receipts This Page (optional) ► 161.79

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: PAGE 47 / 75
(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)
JOHN C PINTOZZI

Mailing Address 2116 W CHURCHILL ST

City State Zip Code
CHICAGO IL 60647

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

Name of Employer Allstate Insurance Company Occupation Vice President Finance -

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.60

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432311

Amount of Each Receipt this Period
65.52

B. Full Name (Last, First, Middle Initial)
JOSEPH P RATH

Mailing Address 359 STAFFORD COURT

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 ▼ 224.68

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431854

Amount of Each Receipt this Period
56.17

C. Full Name (Last, First, Middle Initial)
JOSEPH P RATH

Mailing Address 359 STAFFORD COURT

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 ▼ 280.85

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432282

Amount of Each Receipt this Period
56.17

SUBTOTAL of Receipts This Page (optional) ► 177.86

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: PAGE 48 / 75
(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)
JOHN B REARDON

Mailing Address 441 KELLY LANE

City State Zip Code
CRYSTAL LAKE IL 60012

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 ▼ 203.75

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432157

Amount of Each Receipt this Period
40.75

B. Full Name (Last, First, Middle Initial)
JOSEPH J RICHARDSON

Mailing Address 1411 PARSONS LANE

City State Zip Code
LOWER GWYNEDD PA 19002

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 207.69

Date of Receipt
MM / DD / YYYY
02 / 01 / 2008

Transaction ID: A2008-442374

Amount of Each Receipt this Period
69.23

C. Full Name (Last, First, Middle Initial)
JOSEPH J RICHARDSON

Mailing Address 1411 PARSONS LANE

City State Zip Code
LOWER GWYNEDD PA 19002

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.92

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-431790

Amount of Each Receipt this Period
69.23

SUBTOTAL of Receipts This Page (optional) ► **179.21**

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 49 / 75
(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)
JOSEPH J RICHARDSON

Mailing Address 1411 PARSONS LANE

City LOWER GWYNEDD State PA Zip Code 19002

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 346.15

Date of Receipt 02 / 29 / 2008
Transaction ID: A2008-432218
 Amount of Each Receipt this Period 69.23

B. Full Name (Last, First, Middle Initial)
ANDREW T RIEDER

Mailing Address 7 ONEIDA LANE

City HAWTHORN WOODS State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation AVP Homeowner Initiative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.85

Date of Receipt 02 / 29 / 2008
Transaction ID: A2008-432222
 Amount of Each Receipt this Period 47.17

C. Full Name (Last, First, Middle Initial)
DANIEL J RIVERA

Mailing Address 1632 OLD BARN CIRCLE

City LIBERTYVILLE State IL Zip Code 60048

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 ▼ 242.31

Date of Receipt 02 / 01 / 2008
Transaction ID: A2008-442664
 Amount of Each Receipt this Period 80.77

SUBTOTAL of Receipts This Page (optional) ► 197.17

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 75
(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)
DANIEL J RIVERA

Mailing Address 1632 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼ 323.08

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-432079

Amount of Each Receipt this Period
80.77

B.

Full Name (Last, First, Middle Initial)
DANIEL J RIVERA

Mailing Address 1632 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼ 403.85

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432508

Amount of Each Receipt this Period
80.77

C.

Full Name (Last, First, Middle Initial)
MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
OAK LAWN IL 60453

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

Name of Employer Allstate Insurance Company Occupation AVP Property & Casualty F

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.05

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432372

Amount of Each Receipt this Period
40.41

SUBTOTAL of Receipts This Page (optional) ► **201.95**

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 51 / 75
	(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) MICHAEL J ROCHE		Date of Receipt
	Mailing Address 270 KINGSWAY DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 2 / 0 1 / 2 0 0 8
	City	State	Zip Code
	AURORA	IL	60506
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-442543
Name of Employer Allstate Insurance Company		Occupation SVP-PROTECTION TECH & ADM	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 93.92
		<input type="text"/> 281.76	

B.	Full Name (Last, First, Middle Initial) MICHAEL J ROCHE		Date of Receipt
	Mailing Address 270 KINGSWAY DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	AURORA	IL	60506
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-431958
Name of Employer Allstate Insurance Company		Occupation SVP-PROTECTION TECH & ADM	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 93.92
		<input type="text"/> 375.68	

C.	Full Name (Last, First, Middle Initial) MICHAEL J ROCHE		Date of Receipt
	Mailing Address 270 KINGSWAY DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	AURORA	IL	60506
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-432387
Name of Employer Allstate Insurance Company		Occupation SVP-PROTECTION TECH & ADM	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 93.92
		<input type="text"/> 469.60	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 281.76
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 52 / 75
(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)
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 ▼ 432.69

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442594

Amount of Each Receipt this Period
144.23

B.

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 ▼ 576.92

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-432009

Amount of Each Receipt this Period
144.23

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 ▼ 721.15

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432438

Amount of Each Receipt this Period
144.23

SUBTOTAL of Receipts This Page (optional) ► 432.69

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: PAGE 53 / 75
(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)
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 ▼ 201.48

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431781

Amount of Each Receipt this Period
50.37

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 ▼ 251.85

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432209

Amount of Each Receipt this Period
50.37

C. 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 ▼ 230.75

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432477

Amount of Each Receipt this Period
46.15

SUBTOTAL of Receipts This Page (optional) ► **146.89**

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: (check only one)	PAGE 54 / 75
	<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) STEVEN E SHEBIK		Date of Receipt
	Mailing Address 517 ROBINWOOD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	WHEATON	IL	60187
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-442536
	C		Amount of Each Receipt this Period
		78.74	
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 ▼	
		236.22	

B.	Full Name (Last, First, Middle Initial) STEVEN E SHEBIK		Date of Receipt
	Mailing Address 517 ROBINWOOD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	WHEATON	IL	60187
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-431951
	C		Amount of Each Receipt this Period
		78.74	
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 ▼	
		314.96	

C.	Full Name (Last, First, Middle Initial) STEVEN E SHEBIK		Date of Receipt
	Mailing Address 517 ROBINWOOD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	WHEATON	IL	60187
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-432380
	C		Amount of Each Receipt this Period
		78.74	
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 ▼	
		393.70	

SUBTOTAL of Receipts This Page (optional)	▶	236.22
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 55 / 75
(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)
KEVIN R SLAWIN

Mailing Address 1316 CRESTWOOD DRIVE

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Allstate Insurance Company Occupation VP AF Admin Serv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432422

Amount of Each Receipt this Period
40.20

B.

Full Name (Last, First, Middle Initial)
J E SMITH

Mailing Address 310 WHITMORE 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 VP Distribution and Chann

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.04

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431954

Amount of Each Receipt this Period
58.76

C.

Full Name (Last, First, Middle Initial)
J E SMITH

Mailing Address 310 WHITMORE 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 VP Distribution and Chann

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 293.80

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432383

Amount of Each Receipt this Period
58.76

SUBTOTAL of Receipts This Page (optional) ► 157.72

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: (check only one)	PAGE 56 / 75
	<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) STEVEN P SORENSON	Date of Receipt MM / DD / YYYY 02 / 01 / 2008
	Mailing Address 20712 High Ridge Dr	Transaction ID: A2008-442625
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 75.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.48	

B.	Full Name (Last, First, Middle Initial) STEVEN P SORENSON	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 20712 High Ridge Dr	Transaction ID: A2008-432040
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 75.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.64	

C.	Full Name (Last, First, Middle Initial) STEVEN P SORENSON	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 20712 High Ridge Dr	Transaction ID: A2008-432469
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 75.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.80	

SUBTOTAL of Receipts This Page (optional)	225.48
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 57 / 75
(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)
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 ▼ 205.10

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432287

Amount of Each Receipt this Period
41.02

B.

Full Name (Last, First, Middle Initial)
KEVIN T SULLIVAN

Mailing Address 221 CARRIAGE HILL CIR

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Vice President -Corp Ethn

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 283.62

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: A2008-442692

Amount of Each Receipt this Period
94.54

C.

Full Name (Last, First, Middle Initial)
KEVIN T SULLIVAN

Mailing Address 221 CARRIAGE HILL CIR

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Vice President -Corp Ethn

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 378.16

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-432107

Amount of Each Receipt this Period
94.54

SUBTOTAL of Receipts This Page (optional) ► 230.10

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 58 / 75
(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)
KEVIN T SULLIVAN

Mailing Address 221 CARRIAGE HILL CIR

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Vice President -Corp Ethn

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 472.70

Date of Receipt M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432536

Amount of Each Receipt this Period 94.54

B. Full Name (Last, First, Middle Initial)
KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP Enterprise Applicatio

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.44

Date of Receipt M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431886

Amount of Each Receipt this Period 53.86

C. Full Name (Last, First, Middle Initial)
KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP Enterprise Applicatio

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 269.30

Date of Receipt M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432314

Amount of Each Receipt this Period 53.86

SUBTOTAL of Receipts This Page (optional) ► 202.26

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 59 / 75
(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)
MELINDA S TUNNER

Mailing Address 5430 TALL OAKS 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 AVP Agency Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.05

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432495

Amount of Each Receipt this Period
44.41

B.

Full Name (Last, First, Middle Initial)
WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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 ▼ 206.04

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-431948

Amount of Each Receipt this Period
51.51

C.

Full Name (Last, First, Middle Initial)
WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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 ▼ 257.55

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432377

Amount of Each Receipt this Period
51.51

SUBTOTAL of Receipts This Page (optional) ► **147.43**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 75
	<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 J VELOTTA	Date of Receipt MM / DD / YYYY 02 / 01 / 2008
	Mailing Address 1111 LOYOLA DR	Transaction ID: A2008-442653
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 77.04
	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 ▼ 231.12	

B.	Full Name (Last, First, Middle Initial) MICHAEL J VELOTTA	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 1111 LOYOLA DR	Transaction ID: A2008-432068
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 77.04
	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 ▼ 308.16	

C.	Full Name (Last, First, Middle Initial) MICHAEL J VELOTTA	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 1111 LOYOLA DR	Transaction ID: A2008-432497
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 77.04
	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 ▼ 385.20	

SUBTOTAL of Receipts This Page (optional)	231.12
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 61 / 75
	<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) STEVEN C VERNEY	Date of Receipt MM / DD / YYYY 02 / 01 / 2008
	Mailing Address 37144 FOX HILL DR	Transaction ID: A2008-442348
	City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 67.42
	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 ▼ 202.26	

B.	Full Name (Last, First, Middle Initial) STEVEN C VERNEY	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 37144 FOX HILL DR	Transaction ID: A2008-431764
	City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 67.42
	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 ▼ 269.68	

C.	Full Name (Last, First, Middle Initial) STEVEN C VERNEY	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 37144 FOX HILL DR	Transaction ID: A2008-432192
	City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 67.42
	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 ▼ 337.10	

SUBTOTAL of Receipts This Page (optional)	202.26
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 62 / 75
(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)
JOAN H WALKER

Mailing Address 850 N. Riverwoods Road

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 Corp. Rel.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.95

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432574

Amount of Each Receipt this Period
46.99

B.

Full Name (Last, First, Middle Initial)
ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

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

Name of Employer Allstate Insurance Company Occupation DIRECTOR CREDIT DEPARTMEN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.84

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-431832

Amount of Each Receipt this Period
63.46

C.

Full Name (Last, First, Middle Initial)
ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

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

Name of Employer Allstate Insurance Company Occupation DIRECTOR CREDIT DEPARTMEN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 317.30

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432260

Amount of Each Receipt this Period
63.46

SUBTOTAL of Receipts This Page (optional) ► **173.91**

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 63 / 75

(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)
DOUGLAS B WELCH

Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Occupation
Allstate Insurance Company Vice President Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 222.16

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-431866

Amount of Each Receipt this Period

55.54

B.

Full Name (Last, First, Middle Initial)
DOUGLAS B WELCH

Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Occupation
Allstate Insurance Company Vice President Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 277.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432294

Amount of Each Receipt this Period

55.54

C.

Full Name (Last, First, Middle Initial)
ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City State Zip Code
KILDEER IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Human Resource Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432539

Amount of Each Receipt this Period

40.87

SUBTOTAL of Receipts This Page (optional) ▶

151.95

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 64 / 75
(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)
THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation President & COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 664.62

Date of Receipt
MM / DD / YYYY
02 / 01 / 2008

Transaction ID: A2008-442623

Amount of Each Receipt this Period
221.54

B.

Full Name (Last, First, Middle Initial)
THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation President & COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 886.16

Date of Receipt
MM / DD / YYYY
02 / 15 / 2008

Transaction ID: A2008-432038

Amount of Each Receipt this Period
221.54

C.

Full Name (Last, First, Middle Initial)
THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation President & COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1107.70

Date of Receipt
MM / DD / YYYY
02 / 29 / 2008

Transaction ID: A2008-432467

Amount of Each Receipt this Period
221.54

SUBTOTAL of Receipts This Page (optional) ► 664.62

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 65 / 75

(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)
FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

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 ▼ 235.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	9	/	2	0	0	8

Transaction ID: A2008-432401

Amount of Each Receipt this Period
47.06

B.

Full Name (Last, First, Middle Initial)
LORI J YELVINGTON

Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

FEC ID number of contributing federal political committee. C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	8

Transaction ID: A2008-431980

Amount of Each Receipt this Period
50.44

C.

Full Name (Last, First, Middle Initial)
LORI J YELVINGTON

Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

FEC ID number of contributing federal political committee. C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	9	/	2	0	0	8

Transaction ID: A2008-432409

Amount of Each Receipt this Period
50.44

SUBTOTAL of Receipts This Page (optional) 147.94

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 66 / 75
(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)
RICHARD P YOCIUS

Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

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 ▼ 208.75

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432334

Amount of Each Receipt this Period
41.75

B.

Full Name (Last, First, Middle Initial)
RICHARD M ZAHARIAS

Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation AVP Allstate Life Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 259.04

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-432052

Amount of Each Receipt this Period
64.76

C.

Full Name (Last, First, Middle Initial)
RICHARD M ZAHARIAS

Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation AVP Allstate Life Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 323.80

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-432481

Amount of Each Receipt this Period
64.76

SUBTOTAL of Receipts This Page (optional) ► 171.27

TOTAL This Period (last page this line number only) ► 13582.64

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 67 / 75	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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 Adley Campaign

Mailing Address 611 Jesse Jones Drive

City	State	Zip Code
Benton	LA	71006

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	1	/	2	0	0	8

Transaction ID: A6672

Amount of Each Receipt this Period
500.00

Refund from NonFed. Cmte- originally reported 2007 M10 Report

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	500.00

**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)

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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

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)
Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement
February bank charge.

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District:

Not Applicable

Transaction ID: B210478

Date of Disbursement

02 / 13 / 2008

Amount of Each Disbursement this Period

148.54

SUBTOTAL of Disbursements This Page (optional)

148.54

TOTAL This Period (last page this line number only)

148.54

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 69 / 75

<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

<p>A. Full Name (Last, First, Middle Initial) Melissa Bean for Congress</p> <p>Mailing Address 233 Massachusetts Ave. NE 2nd Flr.</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution Candidate Name Melissa Bean</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B208562 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Rudy Giuliani Presidential Cmte Inc</p> <p>Mailing Address PO Box 1023</p> <p>City Merrifield State VA Zip Code 22116</p> <p>Purpose of Disbursement Contribution Candidate Name Rudy Giuliani</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: VA District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B207871 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period -2500.00</p> <p>011 Category/ Type</p> <p>Check Voided. Check dated 1/28/2008</p>
<p>C. Full Name (Last, First, Middle Initial) Nebraska Republican Party - Fed Acct.</p> <p>Mailing Address 1610 N Street</p> <p>City Lincoln State NE Zip Code 68508</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B208935 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-750.00

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

<p>A. Full Name (Last, First, Middle Initial) Melissa Bean for Congress</p> <p>Mailing Address 233 Massachusetts Ave. NE 2nd Flr.</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Melissa Bean</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IL District: 08</p>	<p>Transaction ID: B208934 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1250.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	9		2	0	0	8	1250.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	9		2	0	0	8													
1250.00																						
<p>B. Full Name (Last, First, Middle Initial) Bob Corker for Senate</p> <p>Mailing Address PO Box 848</p> <p>City Chattanooga State TN Zip Code 37401</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Robert (Bob) P Corker, Jr.</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Ret General</p> <p>State: TN District:</p>	<p>Transaction ID: B208936 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	9		2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	9		2	0	0	8													
1000.00																						
<p>C. Full Name (Last, First, Middle Initial) Bilirakis for Congress</p> <p>Mailing Address PO Box 606</p> <p>City Tarpon Springs State FL Zip Code 34688</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Bilirakis Gus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: FL District: 09</p>	<p>Transaction ID: B208938 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	9		2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	9		2	0	0	8													
1000.00																						

SUBTOTAL of Disbursements This Page (optional)	3250.00
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

<p>A. Full Name (Last, First, Middle Initial) Kirk for Congress</p> <p>Mailing Address 1707 Prince Street #5</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Contribution Candidate Name Mark S Kirk</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B208937 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Cantor for Congress</p> <p>Mailing Address P.O. Box 21027</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Contribution Candidate Name Eric I Cantor</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B209139 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Johanns for U.S. Senate</p> <p>Mailing Address 1201 O Street Suite 101</p> <p>City Lincoln State NE Zip Code 68508</p> <p>Purpose of Disbursement Contribution Candidate Name Mike Johanns</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B209137 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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)

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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

A.	Full Name (Last, First, Middle Initial) Friends of Mary Landrieu	Transaction ID: B209374 Date of Disbursement 02 / 27 / 2008
	Mailing Address 10 G Street NE Suite 470	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Contribution Candidate Name Mary L Landrieu	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Charlie Wilson	Transaction ID: B209373 Date of Disbursement 02 / 27 / 2008
	Mailing Address 38 Ivy Street SE	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Contribution Candidate Name Charles A Wilson, Jr.	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Senate Majority Fund	Transaction ID: B209554 Date of Disbursement 02 / 28 / 2008
	Mailing Address 507 Capitol Court NW #100	Amount of Each Disbursement this Period 1500.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional)	▶	3500.00
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 73 / 75

<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.

Full Name (Last, First, Middle Initial)
DeMint for Senate

Transaction ID: B209557

Date of Disbursement

Mailing Address 712 12th Street NW Suite 700

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	8

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name
James DeMint

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: SC District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

12000.00

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

A. Full Name (Last, First, Middle Initial) Dan Morrish Campaign Fund <hr/> Mailing Address 119 West Nezpique <hr/> City State Zip Code Jennings LA 70546 <hr/> Purpose of Disbursement P-2007 State Senate 25 LA <hr/> Candidate Name Blade Morrish <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B182608 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period -1000.00 <hr/> Check Voided. Check dated 8/10/2007.
	Category/Type 011
B. Full Name (Last, First, Middle Initial) Steve Carter for Attorney General <hr/> Mailing Address 47 South Meridian St. Suite 200 <hr/> City State Zip Code Indianapolis IN 46204 <hr/> Purpose of Disbursement P-2008 State Att. General IN <hr/> Candidate Name Steve Carter <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B209070 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2500.00
	Category/Type 011
C. Full Name (Last, First, Middle Initial) Texans for Greg Abbott <hr/> Mailing Address P.O. Box 308 <hr/> City State Zip Code Austin TX 78767 <hr/> Purpose of Disbursement P-2010 State Att. General TX <hr/> Candidate Name Greg W. Abbott <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B209141 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2500.00
	Category/Type 011

SUBTOTAL of Disbursements This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	4000.00

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.