

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

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	115729.62									
(c) Total Receipts (from Line 19)	29372.31	190922.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	145101.93	309768.74								
7. Total Disbursements (from Line 31)	25654.57	190321.38								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	119447.36	119447.36								
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	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

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	26049.30	110133.56
(i) Itemized (use Schedule A)	3322.65	80283.07
(ii) Unitemized	29371.95	190416.63
(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)	29371.95	190416.63
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	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.)	0.36	5.86
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))	29372.31	190922.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	29372.31	190922.49

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.....	154.57	971.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	154.57	971.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	106000.00
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.....	14500.00	83350.00
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))..	25654.57	190321.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25654.57	190321.38

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)	29371.95	190416.63
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29371.95	190416.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	154.57	971.38
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	154.57	471.38

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 242
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
REBECCA A ABEL

Mailing Address 657 CORAL COURT

City State Zip Code
LINDENHURST IL 60046

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 ▼ 261.60

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153416

Amount of Each Receipt this Period
21.80

B. Full Name (Last, First, Middle Initial)
REBECCA A ABEL

Mailing Address 657 CORAL COURT

City State Zip Code
LINDENHURST IL 60046

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 ▼ 283.40

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152979

Amount of Each Receipt this Period
21.80

C. Full Name (Last, First, Middle Initial)
ERNEST D ADAMS

Mailing Address 33934 N TREELINE CT

City State Zip Code
GAGES LAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation Field Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.38

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153133

Amount of Each Receipt this Period
19.44

SUBTOTAL of Receipts This Page (optional) ► 63.04

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 7 / 242
(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

<p>A. Full Name (Last, First, Middle Initial) ERNEST D ADAMS</p> <p>Mailing Address 33934 N TREELINE CT</p> <p>City State Zip Code GAGES LAKE IL 60030</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Field Operations Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.82</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152696</p> <p>Amount of Each Receipt this Period 19.44</p>
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<p>B. Full Name (Last, First, Middle Initial) JONES G ADUKEH</p> <p>Mailing Address 1226 RIDGEWOOD LANE</p> <p>City State Zip Code LAKE VILLA IL 60046</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Controller</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 385.41</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153339</p> <p>Amount of Each Receipt this Period 32.38</p>
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<p>C. Full Name (Last, First, Middle Initial) JONES G ADUKEH</p> <p>Mailing Address 1226 RIDGEWOOD LANE</p> <p>City State Zip Code LAKE VILLA IL 60046</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Controller</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 417.79</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152904</p> <p>Amount of Each Receipt this Period 32.38</p>
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SUBTOTAL of Receipts This Page (optional)	84.20
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 8 / 242
(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

<p>A. Full Name (Last, First, Middle Initial) LORAL ADUKEH</p> <p>Mailing Address 1226 RIDGEWOOD LANE</p> <p>City State Zip Code LAKE VILLA IL 60046</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Senior Sales Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 383.60</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153401</p> <p>Amount of Each Receipt this Period 32.55</p>
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<p>B. Full Name (Last, First, Middle Initial) LORAL ADUKEH</p> <p>Mailing Address 1226 RIDGEWOOD LANE</p> <p>City State Zip Code LAKE VILLA IL 60046</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Senior Sales Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 416.15</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152964</p> <p>Amount of Each Receipt this Period 32.55</p>
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<p>C. Full Name (Last, First, Middle Initial) MICHAEL W AGAR</p> <p>Mailing Address 200 W MILL VALLEY DR</p> <p>City State Zip Code COLLEYVILLE TX 76034</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 212.55</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152873</p> <p>Amount of Each Receipt this Period 16.35</p>
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SUBTOTAL of Receipts This Page (optional)	81.45
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 242
	<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) PATRICIA A AITKEN	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1245 CARIBOU LANE	Transaction ID: A2008-1153166
	City State Zip Code HOFFMAN ESTATES IL 60192	Amount of Each Receipt this Period 22.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.00

B.	Full Name (Last, First, Middle Initial) PATRICIA A AITKEN	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1245 CARIBOU LANE	Transaction ID: A2008-1152729
	City State Zip Code HOFFMAN ESTATES IL 60192	Amount of Each Receipt this Period 22.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.20

C.	Full Name (Last, First, Middle Initial) ROBERT S ALLEN	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 244 ELM ROAD	Transaction ID: A2008-1153045
	City State Zip Code BARRINGTON IL 60010	Amount of Each Receipt this Period 30.05
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.50

SUBTOTAL of Receipts This Page (optional)	74.45
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 10 / 242
(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 S ALLEN

Mailing Address 244 ELM ROAD

City BARRINGTON State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 379.55

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152611
 Amount of Each Receipt this Period: 30.05

B.

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

Mailing Address 1009 LAKE RIDGE DR.

City SAFETY HARBOR State FL Zip Code 34695

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

Name of Employer Allstate Insurance Company Occupation Human Resource Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.55

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152684
 Amount of Each Receipt this Period: 16.35

C.

Full Name (Last, First, Middle Initial)
JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City GRAYS LAKE State IL Zip Code 60030

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

Name of Employer Allstate Insurance Company Occupation VP Enterprise Infrastruct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 834.11

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153015
 Amount of Each Receipt this Period: 70.78

SUBTOTAL of Receipts This Page (optional) ► **117.18**

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 11 / 242 (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

<p>A. Full Name (Last, First, Middle Initial) JOHN P BADER</p> <p>Mailing Address 438 MITCHELL DRIVE</p> <p>City State Zip Code GRAYS LAKE IL 60030</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation VP Enterprise Infrastruct</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 904.89</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152581</p> <p>Amount of Each Receipt this Period 70.78</p>
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<p>B. Full Name (Last, First, Middle Initial) CHARLES C BAGGS</p> <p>Mailing Address 4435 SWILCAN BRIDGE LANE N</p> <p>City State Zip Code JACKSONVILLE FL 32224</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation AVP-Operations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 375.21</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153108</p> <p>Amount of Each Receipt this Period 31.78</p>
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<p>C. Full Name (Last, First, Middle Initial) CHARLES C BAGGS</p> <p>Mailing Address 4435 SWILCAN BRIDGE LANE N</p> <p>City State Zip Code JACKSONVILLE FL 32224</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation AVP-Operations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 406.99</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152672</p> <p>Amount of Each Receipt this Period 31.78</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	134.34
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) DIANE G BAKER		Date of Receipt MM / DD / YYYY 06 / 06 / 2008		
	Mailing Address 120 EAST SHERIDAN RD		Transaction ID: A2008-1153103		
	City LAKE BLUFF	State IL	Zip Code 60044	Amount of Each Receipt this Period 51.59	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation AVP-PRODUCT OPS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 557.59			

B.	Full Name (Last, First, Middle Initial) DIANE G BAKER		Date of Receipt MM / DD / YYYY 06 / 20 / 2008		
	Mailing Address 120 EAST SHERIDAN RD		Transaction ID: A2008-1152667		
	City LAKE BLUFF	State IL	Zip Code 60044	Amount of Each Receipt this Period 51.59	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation AVP-PRODUCT OPS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 609.18			

C.	Full Name (Last, First, Middle Initial) ALEXANDRA BALATSOUKAS		Date of Receipt MM / DD / YYYY 06 / 06 / 2008		
	Mailing Address 992 WEEPING WAY LANE		Transaction ID: A2008-1153311		
	City AVON	State IN	Zip Code 46123	Amount of Each Receipt this Period 26.90	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 317.60			

SUBTOTAL of Receipts This Page (optional)	▶	130.08
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 / 242
(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 P BALLINGER

Mailing Address 47530 ABERDEEN DR

City State Zip Code
NOVI MI 48374

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

Name of Employer Allstate Insurance Company Occupation FVP President New Jersey

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 413.53

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153082

Amount of Each Receipt this Period
34.99

B.

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

Mailing Address 47530 ABERDEEN DR

City State Zip Code
NOVI MI 48374

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

Name of Employer Allstate Insurance Company Occupation FVP President New Jersey

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 448.52

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152646

Amount of Each Receipt this Period
34.99

C.

Full Name (Last, First, Middle Initial)
ROBERT H BARGE, III

Mailing Address 2222 LOCH WAY

City State Zip Code
EL DORADO HILLS CA 95762

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 ▼ 804.98

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153415

Amount of Each Receipt this Period
68.44

SUBTOTAL of Receipts This Page (optional) ► **138.42**

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 / 242
(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)
ROBERT H BARGE, III

Mailing Address 2222 LOCH WAY

City State Zip Code
EL DORADO HILLS CA 95762

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 ▼ 873.42

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152978

Amount of Each Receipt this Period
68.44

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

Mailing Address 80 RAVINE DRIVE

City State Zip Code
COLONIA NJ 07067

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.84

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153034

Amount of Each Receipt this Period
22.09

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

Mailing Address 80 RAVINE DRIVE

City State Zip Code
COLONIA NJ 07067

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 278.93

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152600

Amount of Each Receipt this Period
22.09

SUBTOTAL of Receipts This Page (optional) ► **112.62**

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 16 / 242
(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)
CANDICE L BEINLICH

Mailing Address 1781 TUDOR LANE # 309

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Human Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 227.66

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153189
 Amount of Each Receipt this Period: 19.13

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

Mailing Address 1781 TUDOR LANE # 309

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Human Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.79

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152752
 Amount of Each Receipt this Period: 19.13

C. Full Name (Last, First, Middle Initial)
DIANE BELLAS

Mailing Address 632 Concord Way

City Prospect Heights State IL Zip Code 60070

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

Name of Employer Allstate Insurance Company Occupation Accounting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.42

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153194
 Amount of Each Receipt this Period: 25.36

SUBTOTAL of Receipts This Page (optional) ► 63.62

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: (check only one)	PAGE 17 / 242
	<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) DIANE BELLAS		Date of Receipt
	Mailing Address 632 Concord Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	Prospect Heights	IL	60070
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152757
		Amount of Each Receipt this Period	
		<input type="text"/> 25.36	
Name of Employer Allstate Insurance Company		Occupation Accounting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 324.78	

B.	Full Name (Last, First, Middle Initial) WALTER A BERKOWICZ		Date of Receipt
	Mailing Address 405 GATESHEAD DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City	State	Zip Code
	NAPERVILLE	IL	60565
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1153271
		Amount of Each Receipt this Period	
		<input type="text"/> 32.68	
Name of Employer Allstate Insurance Company		Occupation CC IT Planning Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 387.56	

C.	Full Name (Last, First, Middle Initial) WALTER A BERKOWICZ		Date of Receipt
	Mailing Address 405 GATESHEAD DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	NAPERVILLE	IL	60565
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152834
		Amount of Each Receipt this Period	
		<input type="text"/> 32.68	
Name of Employer Allstate Insurance Company		Occupation CC IT Planning Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 420.24	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 90.72
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 18 / 242
(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)
EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
GLENCOE IL 60022

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 474.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153053

Amount of Each Receipt this Period
40.00

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

Mailing Address 807 Greenwood Ave.

City State Zip Code
GLENCOE IL 60022

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 514.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152618

Amount of Each Receipt this Period
40.00

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

Mailing Address 480 LEES LAKE RD

City State Zip Code
FAYETTEVILLE GA 30214

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

Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.27

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153121

Amount of Each Receipt this Period
19.76

SUBTOTAL of Receipts This Page (optional) ► 99.76

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: PAGE 19 / 242
(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)
DAVID G BIEMILLER

Mailing Address 480 LEES LAKE RD

City State Zip Code
FAYETTEVILLE GA 30214

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

Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 254.03

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152685

Amount of Each Receipt this Period
19.76

B.

Full Name (Last, First, Middle Initial)
DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City State Zip Code
PONTE VEDRA BEA FL 32082

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

Name of Employer Allstate Insurance Company Occupation President-Allstate Workpl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 467.52

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153342

Amount of Each Receipt this Period
39.36

C.

Full Name (Last, First, Middle Initial)
DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City State Zip Code
PONTE VEDRA BEA FL 32082

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

Name of Employer Allstate Insurance Company Occupation President-Allstate Workpl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 506.88

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152907

Amount of Each Receipt this Period
39.36

SUBTOTAL of Receipts This Page (optional) ► 98.48

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 20 / 242

(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 BLOCK

Mailing Address 398 Brookmont Lane

City State Zip Code
North Barrington IL 60010

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 ▼ 727.97

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153329

Amount of Each Receipt this Period

61.41

B.

Full Name (Last, First, Middle Initial)
ROBERT L BLOCK

Mailing Address 398 Brookmont Lane

City State Zip Code
North Barrington IL 60010

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 ▼ 789.38

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152894

Amount of Each Receipt this Period

61.41

C.

Full Name (Last, First, Middle Initial)
CHARLES A BOLLINGER

Mailing Address 509 GATES HEAD SOUTH

City State Zip Code
ELK GROVE VLLGE IL 60007

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

Name of Employer Occupation
Allstate Insurance Company Vice President Sales Agen

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 594.40

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153147

Amount of Each Receipt this Period

50.30

SUBTOTAL of Receipts This Page (optional)

173.12

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 21 / 242
	<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) CHARLES A BOLLINGER		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 509 GATES HEAD SOUTH		Transaction ID: A2008-1152710
	City ELK GROVE VLLGE	State IL	Zip Code 60007
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.30
	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 ▼ 644.70	

B.	Full Name (Last, First, Middle Initial) CAROL L BONOVIK		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 6 N. MILLERS LANE		Transaction ID: A2008-1152823
	City MT. PROSPECT	State IL	Zip Code 60056
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.33
	Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.94	

C.	Full Name (Last, First, Middle Initial) DOUGLAS L BORG		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 5550 Maybeck Ln		Transaction ID: A2008-1153412
	City Livermore	State CA	Zip Code 94550
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.83
	Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.60	

SUBTOTAL of Receipts This Page (optional)	▶	99.46
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 242

(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 L BORG

Mailing Address 5550 Maybeck Ln

City State Zip Code
Livermore CA 94550

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

Name of Employer Occupation
Allstate Insurance Company Territorial Distribution

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 423.43

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152975

Amount of Each Receipt this Period

32.83

B.

Full Name (Last, First, Middle Initial)
MICHAEL B BOYLE

Mailing Address 1063 CHERRY STREET

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
Allstate Insurance Company Vice President Info Techn

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 899.99

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153086

Amount of Each Receipt this Period

75.77

C.

Full Name (Last, First, Middle Initial)
MICHAEL B BOYLE

Mailing Address 1063 CHERRY STREET

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
Allstate Insurance Company Vice President Info Techn

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 975.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152650

Amount of Each Receipt this Period

75.77

SUBTOTAL of Receipts This Page (optional) ▶

184.37

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 / 242
(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)
LONDON B BRADLEY

Mailing Address 1951 BROADSMORE

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 359.23

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153377

Amount of Each Receipt this Period
30.54

B.

Full Name (Last, First, Middle Initial)
LONDON B BRADLEY

Mailing Address 1951 BROADSMORE

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 389.77

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152940

Amount of Each Receipt this Period
30.54

C.

Full Name (Last, First, Middle Initial)
KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code
IVANHOE IL 60060

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 ▼ 256.37

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153345

Amount of Each Receipt this Period
21.71

SUBTOTAL of Receipts This Page (optional) ► **82.79**

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 24 / 242

(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)
KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code
IVANHOE IL 60060

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

Name of Employer Occupation
Allstate Insurance Company Sales Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 278.08

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152910

Amount of Each Receipt this Period

21.71

B.

Full Name (Last, First, Middle Initial)
JEFFREY P BRASK

Mailing Address 21285 S. BOSCHOME CIRCLE

City State Zip Code
KILDEER IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.56

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153219

Amount of Each Receipt this Period

19.88

C.

Full Name (Last, First, Middle Initial)
JEFFREY P BRASK

Mailing Address 21285 S. BOSCHOME CIRCLE

City State Zip Code
KILDEER IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 258.44

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152782

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

61.47

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 25 / 242

(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)
SHEILA M BREEDING

Mailing Address 35 FAIRMONT AVENUE

City State Zip Code
SOMERVILLE NJ 08876

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

Name of Employer Occupation
Allstate Insurance Company Senior Field Corporate Re

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.55

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152604

Amount of Each Receipt this Period

16.35

B.

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

Mailing Address 18135 W MEANDER DR

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company Finance Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 223.32

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153070

Amount of Each Receipt this Period

18.91

C.

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

Mailing Address 18135 W MEANDER DR

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company Finance Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 242.23

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152635

Amount of Each Receipt this Period

18.91

SUBTOTAL of Receipts This Page (optional)

54.17

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 26 / 242
(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)
SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 485.59

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153205

Amount of Each Receipt this Period
41.75

B.

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

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 527.34

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152768

Amount of Each Receipt this Period
41.75

C.

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

Mailing Address 305 CHURCHILL LANE

City State Zip Code
GURNEE IL 60031

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 422.62

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153094

Amount of Each Receipt this Period
35.51

SUBTOTAL of Receipts This Page (optional) ► **119.01**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 242
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 305 CHURCHILL LANE

City State Zip Code
GURNEE IL 60031

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 458.13

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152658

Amount of Each Receipt this Period 35.51

B. Full Name (Last, First, Middle Initial)
WILLIAM F BROKAW

Mailing Address 3 MILTON CT

City State Zip Code
CARY IL 60013

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 ▼ 238.56

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153199

Amount of Each Receipt this Period 19.88

C. Full Name (Last, First, Middle Initial)
WILLIAM F BROKAW

Mailing Address 3 MILTON CT

City State Zip Code
CARY IL 60013

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 ▼ 258.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152762

Amount of Each Receipt this Period 19.88

SUBTOTAL of Receipts This Page (optional) ► 75.27

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 / 242
(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

<p>A. Full Name (Last, First, Middle Initial) LORRIE K BROUSE</p> <p>Mailing Address 223 POLK PLACE DRIVE</p> <p>City State Zip Code FRANKLIN TN 37064</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Home Office Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.57</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153096</p> <p>Amount of Each Receipt this Period 17.76</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) LORRIE K BROUSE</p> <p>Mailing Address 223 POLK PLACE DRIVE</p> <p>City State Zip Code FRANKLIN TN 37064</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Home Office Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 228.33</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152660</p> <p>Amount of Each Receipt this Period 17.76</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) BETH A BROWN</p> <p>Mailing Address 2637 W. WILSON AVE.</p> <p>City State Zip Code CHICAGO IL 60625</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Home Office Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 258.73</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153151</p> <p>Amount of Each Receipt this Period 19.88</p>
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SUBTOTAL of Receipts This Page (optional)	55.40
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 / 242
	(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)
BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City State Zip Code
CHICAGO IL 60625

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 ▼ 278.61

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152714

Amount of Each Receipt this Period
19.88

B. Full Name (Last, First, Middle Initial)
MICHAEL E BROWN

Mailing Address 8739 CYPRESS RESERVE CIRCLE

City State Zip Code
ORLANDO FL 32836

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

Name of Employer Allstate Insurance Company Occupation Agency Consulting Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 219.47

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153054

Amount of Each Receipt this Period
18.51

C. Full Name (Last, First, Middle Initial)
MICHAEL E BROWN

Mailing Address 8739 CYPRESS RESERVE CIRCLE

City State Zip Code
ORLANDO FL 32836

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

Name of Employer Allstate Insurance Company Occupation Agency Consulting Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.98

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152619

Amount of Each Receipt this Period
18.51

SUBTOTAL of Receipts This Page (optional) ► 56.90

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 242
(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)
PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City State Zip Code
LONG GROVE 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 ▼ 238.56

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153305

Amount of Each Receipt this Period
19.88

B.

Full Name (Last, First, Middle Initial)
PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City State Zip Code
LONG GROVE 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 ▼ 258.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152870

Amount of Each Receipt this Period
19.88

C.

Full Name (Last, First, Middle Initial)
CATHERINE S BRUNE

Mailing Address 190 SAVANNA CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation SVP & Chief Information O

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2149.62

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153107

Amount of Each Receipt this Period
183.46

SUBTOTAL of Receipts This Page (optional) ► **223.22**

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 31 / 242
(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)
CATHERINE S BRUNE

Mailing Address 190 SAVANNA CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation SVP & Chief Information O

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2333.08

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152671

Amount of Each Receipt this Period
183.46

B. Full Name (Last, First, Middle Initial)
ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

City State Zip Code
BERWYN IL 60402

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 ▼ 421.88

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2008

Transaction ID: A2008-1153201

Amount of Each Receipt this Period
35.59

C. Full Name (Last, First, Middle Initial)
ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

City State Zip Code
BERWYN IL 60402

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 ▼ 457.47

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152764

Amount of Each Receipt this Period
35.59

SUBTOTAL of Receipts This Page (optional) ► 254.64

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 32 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JOHN C BRUSE		Date of Receipt
	Mailing Address 1434 WOODACRE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 6 / 0 6 / 2 0 0 8
	City	State	Zip Code
	MC LEAN	VA	22101
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153391
Name of Employer Allstate Insurance Company		Occupation Vice President & Ast Gene	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"/> 36.36
		<input type="text"/> 395.72	

B.	Full Name (Last, First, Middle Initial) JOHN C BRUSE		Date of Receipt
	Mailing Address 1434 WOODACRE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 6 / 2 0 / 2 0 0 8
	City	State	Zip Code
	MC LEAN	VA	22101
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152954
Name of Employer Allstate Insurance Company		Occupation Vice President & Ast Gene	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"/> 36.36
		<input type="text"/> 432.08	

C.	Full Name (Last, First, Middle Initial) RHONDA J BUBAN		Date of Receipt
	Mailing Address 856 SPRINGHILL CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 6 / 2 0 / 2 0 0 8
	City	State	Zip Code
	ELGIN	IL	60120
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152715
Name of Employer Allstate Insurance Company		Occupation Human Resource 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 ▼	<input type="text"/> 16.44
		<input type="text"/> 207.97	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 89.16
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 33 / 242
(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)
DAVID N BUGGS

Mailing Address 12234 85TH AVE

City Pleasant PR State WI Zip Code 53158

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

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.68

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153330
 Amount of Each Receipt this Period: 32.14

B.

Full Name (Last, First, Middle Initial)
DAVID N BUGGS

Mailing Address 12234 85TH AVE

City Pleasant PR State WI Zip Code 53158

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

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 417.82

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152895
 Amount of Each Receipt this Period: 32.14

C.

Full Name (Last, First, Middle Initial)
KAREN E BURCKHARDT

Mailing Address 730 E. HAWTHORNE

City ARLINGTON HTS State IL Zip Code 60004

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

Name of Employer Allstate Insurance Company Occupation AVP-Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.80

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153328
 Amount of Each Receipt this Period: 42.50

SUBTOTAL of Receipts This Page (optional) ► 106.78

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 242
	<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	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 730 E. HAWTHORNE	Transaction ID: A2008-1152893
	City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: AVP-Product Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 547.30	

B.	Full Name (Last, First, Middle Initial) GREGORY C BURNS	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 2000 N. BROADMOOR LANE	Transaction ID: A2008-1153059
	City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 20.93
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Human Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.01	

C.	Full Name (Last, First, Middle Initial) GREGORY C BURNS	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2000 N. BROADMOOR LANE	Transaction ID: A2008-1152624
	City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 20.93
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Human Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 258.94	

SUBTOTAL of Receipts This Page (optional)	84.36
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 35 / 242
(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)
PEGGY BURROWS
Mailing Address 2628 HALSEY DRIVE
City State Zip Code
FLOWER MOUND TX 75028
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.16
Date of Receipt MM / DD / YYYY
06 / 06 / 2008
Transaction ID: A2008-1153357
Amount of Each Receipt this Period 28.43

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 Allstate Insurance Company Occupation AVP & Tax Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1061.77
Date of Receipt MM / DD / YYYY
06 / 06 / 2008
Transaction ID: A2008-1153003
Amount of Each Receipt this Period 89.71

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 Allstate Insurance Company Occupation AVP & Tax Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1151.48
Date of Receipt MM / DD / YYYY
06 / 20 / 2008
Transaction ID: A2008-1152570
Amount of Each Receipt this Period 89.71

SUBTOTAL of Receipts This Page (optional) ► 207.85
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 36 / 242
(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)
D C BUTLER, III

Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
ALPHARETTA GA 30004

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 ▼ 647.53

Date of Receipt M M / D D / Y Y Y Y Y
06 / 06 / 2008

Transaction ID: A2008-1153105

Amount of Each Receipt this Period 54.84

B. Full Name (Last, First, Middle Initial)
D C BUTLER, III

Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
ALPHARETTA GA 30004

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 ▼ 702.37

Date of Receipt M M / D D / Y Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152669

Amount of Each Receipt this Period 54.84

C. Full Name (Last, First, Middle Initial)
RICHARD S CAIRNS

Mailing Address 2791 NE 9TH COURT

City State Zip Code
POMPANO BEACH FL 33062

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

Name of Employer Allstate Insurance Company Occupation Distribution Support Lead

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.53

Date of Receipt M M / D D / Y Y Y Y Y
06 / 06 / 2008

Transaction ID: A2008-1153110

Amount of Each Receipt this Period 17.54

SUBTOTAL of Receipts This Page (optional) ► 127.22

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 37 / 242

(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 S CAIRNS

Mailing Address 2791 NE 9TH COURT

City State Zip Code
POMPANO BEACH FL 33062

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

Name of Employer Occupation
Allstate Insurance Company Distribution Support Lead

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 223.07

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152674

Amount of Each Receipt this Period

17.54

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 Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 739.69

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153312

Amount of Each Receipt this Period

62.52

C.

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 Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 802.21

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152877

Amount of Each Receipt this Period

62.52

SUBTOTAL of Receipts This Page (optional)

142.58

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 / 242
(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)
IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.49

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153338

Amount of Each Receipt this Period
23.97

B.

Full Name (Last, First, Middle Initial)
IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.46

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152903

Amount of Each Receipt this Period
23.97

C.

Full Name (Last, First, Middle Initial)
VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation Communication Senior Mana

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.26

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153279

Amount of Each Receipt this Period
20.43

SUBTOTAL of Receipts This Page (optional) ► 68.37

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 / 242
(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)
VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation Communication Senior Mana

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.69

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152843

Amount of Each Receipt this Period
20.43

B. Full Name (Last, First, Middle Initial)
SCOTT M CHRISTENSEN

Mailing Address 20713 LEXINGTON LANE

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 452.13

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153261

Amount of Each Receipt this Period
37.99

C. Full Name (Last, First, Middle Initial)
SCOTT M CHRISTENSEN

Mailing Address 20713 LEXINGTON LANE

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.12

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152824

Amount of Each Receipt this Period
37.99

SUBTOTAL of Receipts This Page (optional) ► 96.41

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 40 / 242
(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)
BRIAN L CLARK

Mailing Address 504 FLORENCE DRIVE

City MADISON State MS Zip Code 39110

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

Name of Employer Allstate Insurance Company Occupation Staff Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152909

Amount of Each Receipt this Period 15.62

B.

Full Name (Last, First, Middle Initial)
EDWARD T CLARK

Mailing Address 2907 GLENARYE DR

City LINDENHURST State IL Zip Code 60046

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

Name of Employer Allstate Insurance Company Occupation Regional Marketing Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.17

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153288

Amount of Each Receipt this Period 24.21

C.

Full Name (Last, First, Middle Initial)
EDWARD T CLARK

Mailing Address 2907 GLENARYE DR

City LINDENHURST State IL Zip Code 60046

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

Name of Employer Allstate Insurance Company Occupation Regional Marketing Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.38

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152852

Amount of Each Receipt this Period 24.21

SUBTOTAL of Receipts This Page (optional) ▶ **64.04**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 242
	<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) MARK P CLOGHESSY		Date of Receipt
	Mailing Address 4343 LAWN AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	WESTERN SPRINGS	IL	60558
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1153140
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Allstate Insurance Company		Occupation Managing Director	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	34.33
		<input type="text"/>	406.16

B.	Full Name (Last, First, Middle Initial) MARK P CLOGHESSY		Date of Receipt
	Mailing Address 4343 LAWN AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	WESTERN SPRINGS	IL	60558
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152703
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Allstate Insurance Company		Occupation Managing Director	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	34.33
		<input type="text"/>	440.49

C.	Full Name (Last, First, Middle Initial) DEBORAH L CLOUSER		Date of Receipt
	Mailing Address 4667 TAMWORTH DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	PALM HARBOR	FL	34685
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1153286
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Allstate Insurance Company		Occupation Senior Field Corporate Re	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	29.26
		<input type="text"/>	343.97

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>	97.92
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 42 / 242

(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 L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
PALM HARBOR FL 34685

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

Name of Employer Occupation
Allstate Insurance Company Senior Field Corporate Re

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 373.23

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152850

Amount of Each Receipt this Period

29.26

B.

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

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
Allstate Insurance Company Vice President Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 389.45

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153247

Amount of Each Receipt this Period

33.05

C.

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

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
Allstate Insurance Company Vice President Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 422.50

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152810

Amount of Each Receipt this Period

33.05

SUBTOTAL of Receipts This Page (optional)

95.36

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 43 / 242
(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 A COFFEY

Mailing Address 21200 W. KEPWICK

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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: A2008-1157854

Amount of Each Receipt this Period
500.00

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

Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 513.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	8

Transaction ID: A2008-1153190

Amount of Each Receipt this Period
39.77

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

Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 553.19

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: A2008-1152753

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional) ► **579.54**

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 / 242
(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)
LARRY K CONLEE

Mailing Address 4516 LINSKOTT AVE

City State Zip Code
DOWNS GROVE IL 60515

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

Name of Employer Allstate Insurance Company Occupation Senior Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153231

Amount of Each Receipt this Period
19.02

B.

Full Name (Last, First, Middle Initial)
LARRY K CONLEE

Mailing Address 4516 LINSKOTT AVE

City State Zip Code
DOWNS GROVE IL 60515

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

Name of Employer Allstate Insurance Company Occupation Senior Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.46

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152794

Amount of Each Receipt this Period
19.02

C.

Full Name (Last, First, Middle Initial)
MICHAEL P COOGAN

Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

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

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 358.95

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153251

Amount of Each Receipt this Period
30.40

SUBTOTAL of Receipts This Page (optional) ► 68.44

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 45 / 242

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
MICHAEL P COOGAN

Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

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

Name of Employer Occupation
Allstate Insurance Company CC IT Planning Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 389.35

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152814

Amount of Each Receipt this Period

30.40

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 ▼ 806.89

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153352

Amount of Each Receipt this Period

67.52

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 Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 874.41

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152917

Amount of Each Receipt this Period

67.52

SUBTOTAL of Receipts This Page (optional)

165.44

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 / 242
(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 CREAGH

Mailing Address 4008 NORTH HIGHLAND AVENUE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.48

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153036

Amount of Each Receipt this Period
19.79

B.

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

Mailing Address 4008 NORTH HIGHLAND AVENUE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 257.27

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152602

Amount of Each Receipt this Period
19.79

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 Allstate Insurance Company Occupation Vice President & Deputy G

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 868.48

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153149

Amount of Each Receipt this Period
73.84

SUBTOTAL of Receipts This Page (optional) ► **113.42**

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 / 242
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

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 ▼
942.32

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152712

Amount of Each Receipt this Period
73.84

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 ▼
1003.19

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 06 / 2008

Transaction ID: A2008-1153142

Amount of Each Receipt this Period
85.62

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 ▼
1088.81

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152705

Amount of Each Receipt this Period
85.62

SUBTOTAL of Receipts This Page (optional) ► **245.08**

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 / 242
(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)
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 ▼ 825.99

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153065
Amount of Each Receipt this Period: 69.12

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 ▼ 895.11

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152630
Amount of Each Receipt this Period: 69.12

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 ▼ 498.67

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153052
Amount of Each Receipt this Period: 42.56

SUBTOTAL of Receipts This Page (optional) ► 180.80

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 242
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

<p>A. Full Name (Last, First, Middle Initial) WILLIAM DALY</p> <p>Mailing Address 22425 N LINDEN DR.</p> <p>City State Zip Code BARRINGTON IL 60010</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Claim Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 541.23</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152617</p> <p>Amount of Each Receipt this Period 42.56</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) ROBERT W DANIELS</p> <p>Mailing Address 1020 Pleasant Street #1</p> <p>City State Zip Code Oak Park IL 60302</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Communication Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 426.59</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153093</p> <p>Amount of Each Receipt this Period 36.32</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) ROBERT W DANIELS</p> <p>Mailing Address 1020 Pleasant Street #1</p> <p>City State Zip Code Oak Park IL 60302</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Communication Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 462.91</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152657</p> <p>Amount of Each Receipt this Period 36.32</p>
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SUBTOTAL of Receipts This Page (optional)	115.20
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 / 242

(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)
SAM DE FRANK

Mailing Address 5 COURT OF HIDDEN WELLS

City State Zip Code
NORTHBROOK IL 60062

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 ▼ 405.49

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153196

Amount of Each Receipt this Period

34.37

B.

Full Name (Last, First, Middle Initial)
SAM DE FRANK

Mailing Address 5 COURT OF HIDDEN WELLS

City State Zip Code
NORTHBROOK IL 60062

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 ▼ 439.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152759

Amount of Each Receipt this Period

34.37

C.

Full Name (Last, First, Middle Initial)
RANDAL S DECOURSEY

Mailing Address 6710 BLUE RIDGE LANE

City State Zip Code
LINCOLN NE 68516

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

Name of Employer Occupation
Allstate Insurance Company Operations Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 254.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153193

Amount of Each Receipt this Period

32.10

SUBTOTAL of Receipts This Page (optional)

100.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 242

(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)
RANDAL S DECOURSEY

Mailing Address 6710 BLUE RIDGE LANE

City State Zip Code
LINCOLN NE 68516

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

Name of Employer Occupation
Allstate Insurance Company Operations Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.80

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152756

Amount of Each Receipt this Period

32.10

B.

Full Name (Last, First, Middle Initial)
STEVEN J DEGNAN-SCHMIDT

Mailing Address 1320 MULBERRY LN.

City State Zip Code
CARY IL 60013

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

Name of Employer Occupation
Allstate Insurance Company Operations Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 433.52

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153127

Amount of Each Receipt this Period

36.61

C.

Full Name (Last, First, Middle Initial)
STEVEN J DEGNAN-SCHMIDT

Mailing Address 1320 MULBERRY LN.

City State Zip Code
CARY IL 60013

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

Name of Employer Occupation
Allstate Insurance Company Operations Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.13

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152691

Amount of Each Receipt this Period

36.61

SUBTOTAL of Receipts This Page (optional)

105.32

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 52 / 242

(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 Occupation
Allstate Insurance Company AVP Specialty Lines

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 639.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

Transaction ID: A2008-1153301

Amount of Each Receipt this Period

54.05

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 Occupation
Allstate Insurance Company AVP Specialty Lines

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 693.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	0	8

Transaction ID: A2008-1152865

Amount of Each Receipt this Period

54.05

C.

Full Name (Last, First, Middle Initial)

LORI A DESCH

Mailing Address 5 TREGONWELL COURT

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 393.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

Transaction ID: A2008-1153119

Amount of Each Receipt this Period

33.55

SUBTOTAL of Receipts This Page (optional) ▶

141.65

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 53 / 242
(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)
LORI A DESCH

Mailing Address 5 TREGONWELL COURT

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation Claim Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 426.65

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152683

Amount of Each Receipt this Period
33.55

B.

Full Name (Last, First, Middle Initial)
KRISTINE DIGIROLAMO

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code
BARRINGTON HILL IL 60102

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.66

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153324

Amount of Each Receipt this Period
17.23

C.

Full Name (Last, First, Middle Initial)
KRISTINE DIGIROLAMO

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code
BARRINGTON HILL IL 60102

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 219.89

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152889

Amount of Each Receipt this Period
17.23

SUBTOTAL of Receipts This Page (optional) ► 68.01

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

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

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

FOR LINE NUMBER: PAGE 54 / 242
(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)
LEO DISHEL

Mailing Address 340 E 74TH ST APT 6C

City State Zip Code
NEW YORK NY 10021

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153033

Amount of Each Receipt this Period
20.50

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

Mailing Address 340 E 74TH ST APT 6C

City State Zip Code
NEW YORK NY 10021

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.50

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152599

Amount of Each Receipt this Period
20.50

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 ▼ 681.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153278

Amount of Each Receipt this Period
57.35

SUBTOTAL of Receipts This Page (optional) ► 98.35

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 55 / 242
	<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		Date of Receipt
	Mailing Address 4147 RFD		<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 06 / 20 / 2008
	City	State	Zip Code
	LONG GROVE	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152842
Name of Employer Allstate Insurance Company		Occupation AVP Northbrook/Glenbrook	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 ▼ 738.55	57.35

B.	Full Name (Last, First, Middle Initial) PHILIP J DORN		Date of Receipt
	Mailing Address 12 SAINT JOHN DRIVE		<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 06 / 06 / 2008
	City	State	Zip Code
	HAWTHORN WOODS	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153395
Name of Employer Allstate Insurance Company		Occupation Investor Relations Direct	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 ▼ 238.56	19.88

C.	Full Name (Last, First, Middle Initial) PHILIP J DORN		Date of Receipt
	Mailing Address 12 SAINT JOHN DRIVE		<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 06 / 20 / 2008
	City	State	Zip Code
	HAWTHORN WOODS	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152958
Name of Employer Allstate Insurance Company		Occupation Investor Relations Direct	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 ▼ 258.44	19.88

SUBTOTAL of Receipts This Page (optional)	97.11
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: (check only one)	PAGE 56 / 242
	<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 DRESSEL	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1706 ADLER LANE	Transaction ID: A2008-1153068
	City MALVERN State PA Zip Code 19355	Amount of Each Receipt this Period 19.88
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claims Field Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.56	

B.	Full Name (Last, First, Middle Initial) DANIEL C DRESSEL	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1706 ADLER LANE	Transaction ID: A2008-1152633
	City MALVERN State PA Zip Code 19355	Amount of Each Receipt this Period 19.88
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claims Field Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 258.44	

C.	Full Name (Last, First, Middle Initial) TIMOTHY R DUGAN	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 3220 SANDY LANE	Transaction ID: A2008-1153385
	City GLENVIEW State IL Zip Code 60025	Amount of Each Receipt this Period 30.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 365.11	

SUBTOTAL of Receipts This Page (optional)	70.74
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 57 / 242
(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)
TIMOTHY R DUGAN

Mailing Address 3220 SANDY LANE

City State Zip Code
GLENVIEW IL 60025

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 ▼ 396.09

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152948

Amount of Each Receipt this Period
30.98

B.

Full Name (Last, First, Middle Initial)
WILLIAM F DULIN

Mailing Address 1301 NORMANDY CT

City State Zip Code
SOUTHLAKE TX 76092

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

Name of Employer Allstate Insurance Company Occupation Education and Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.90

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152670

Amount of Each Receipt this Period
15.60

C.

Full Name (Last, First, Middle Initial)
LAURA DUNNE

Mailing Address 1810 BALMORAL AVE

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation AVP Strategy Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.21

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153264

Amount of Each Receipt this Period
23.18

SUBTOTAL of Receipts This Page (optional) ► 69.76

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: PAGE 58 / 242
(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) LAURA DUNNE		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
Mailing Address 1810 BALMORAL AVE		Transaction ID: A2008-1152827
City GLENVIEW	State IL	Zip Code 60025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.18
Name of Employer Allstate Insurance Company	Occupation AVP Strategy Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.39	

B.

Full Name (Last, First, Middle Initial) DANIEL P DURBIN		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
Mailing Address 1311 SOUTH WALNUT AVE.		Transaction ID: A2008-1153284
City ARLINGTON HTS.	State IL	Zip Code 60005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.81
Name of Employer Allstate Insurance Company	Occupation AF Operations Dept Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.17	

C.

Full Name (Last, First, Middle Initial) DANIEL P DURBIN		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
Mailing Address 1311 SOUTH WALNUT AVE.		Transaction ID: A2008-1152848
City ARLINGTON HTS.	State IL	Zip Code 60005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.81
Name of Employer Allstate Insurance Company	Occupation AF Operations Dept Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.98	

SUBTOTAL of Receipts This Page (optional)	▶	80.80
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 59 / 242
	<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) SHEILA A ECKHOFF	Date of Receipt
	Mailing Address 211 N ERIE ST	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City State Zip Code WHEATON IL 60187	Transaction ID: A2008-1153161
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 18.74
	Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 234.98	

B.	Full Name (Last, First, Middle Initial) SHEILA A ECKHOFF	Date of Receipt
	Mailing Address 211 N ERIE ST	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City State Zip Code WHEATON IL 60187	Transaction ID: A2008-1152724
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 19.94
	Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 254.92	

C.	Full Name (Last, First, Middle Initial) PHILIP L EMMANUELE	Date of Receipt
	Mailing Address 1085 FOREST HILL RD.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City State Zip Code LAKE FOREST IL 60045	Transaction ID: A2008-1153035
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 60.90
	Name of Employer Allstate Insurance Company Occupation AVP Marketing Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 726.30	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 99.58
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 60 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) PHILIP L EMMANUELE		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1085 FOREST HILL RD.		Transaction ID: A2008-1152601
	City LAKE FOREST	State IL	Zip Code 60045
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.90
	Name of Employer Allstate Insurance Company	Occupation AVP Marketing Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 787.20	

B.	Full Name (Last, First, Middle Initial) KATHLEEN N ENRIGHT		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 10323 TRUMBULL AVE		Transaction ID: A2008-1153293
	City CHICAGO	State IL	Zip Code 60655
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.08
	Name of Employer Allstate Insurance Company	Occupation AVP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 426.01	

C.	Full Name (Last, First, Middle Initial) KATHLEEN N ENRIGHT		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 10323 TRUMBULL AVE		Transaction ID: A2008-1152857
	City CHICAGO	State IL	Zip Code 60655
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.08
	Name of Employer Allstate Insurance Company	Occupation AVP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 462.09	

SUBTOTAL of Receipts This Page (optional)	133.06
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 / 242
	<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 L ESCOBAR	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 660 BALMORAL LANE	Transaction ID: A2008-1153018
	City State Zip Code INVERNESS IL 60067	Amount of Each Receipt this Period 52.69
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Finance Innovation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 619.73	

B.	Full Name (Last, First, Middle Initial) MICHAEL L ESCOBAR	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 660 BALMORAL LANE	Transaction ID: A2008-1152584
	City State Zip Code INVERNESS IL 60067	Amount of Each Receipt this Period 52.69
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Finance Innovation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 672.42	

C.	Full Name (Last, First, Middle Initial) RICHARD B ESPINOZA	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 673 HASTINGS ROAD	Transaction ID: A2008-1153213
	City State Zip Code WHEELING IL 60090	Amount of Each Receipt this Period 32.26
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Unclassified Sr Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 380.92	

SUBTOTAL of Receipts This Page (optional)	137.64
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 62 / 242

(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 B ESPINOZA

Mailing Address 673 HASTINGS ROAD

City State Zip Code
WHEELING IL 60090

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

Name of Employer Occupation
Allstate Insurance Company Unclassified Sr Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 413.18

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152776

Amount of Each Receipt this Period

32.26

B.

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 Occupation
Allstate Insurance Company Vice President Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 509.03

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153050

Amount of Each Receipt this Period

42.94

C.

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 Occupation
Allstate Insurance Company Vice President Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 551.97

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152615

Amount of Each Receipt this Period

42.94

SUBTOTAL of Receipts This Page (optional)

118.14

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 / 242

(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)
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 ▼ 994.95

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153188

Amount of Each Receipt this Period

83.70

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 ▼ 1078.65

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152751

Amount of Each Receipt this Period

83.70

C.

Full Name (Last, First, Middle Initial)
KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 462.11

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153337

Amount of Each Receipt this Period

38.98

SUBTOTAL of Receipts This Page (optional)

206.38

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 242
(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)
KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.09

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152902

Amount of Each Receipt this Period
38.98

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 ▼ 566.37

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153210

Amount of Each Receipt this Period
48.06

C.

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 ▼ 614.43

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152773

Amount of Each Receipt this Period
48.06

SUBTOTAL of Receipts This Page (optional) ► **135.10**

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 65 / 242
(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)
CAROLYN A FILIPOVIC
Mailing Address 918 JUNIPER ROAD

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation Senior Regional Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 313.74

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8
Transaction ID: A2008-1153316
Amount of Each Receipt this Period 26.57

B. Full Name (Last, First, Middle Initial)
CAROLYN A FILIPOVIC
Mailing Address 918 JUNIPER ROAD

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation Senior Regional Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.31

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8
Transaction ID: A2008-1152881
Amount of Each Receipt this Period 26.57

C. Full Name (Last, First, Middle Initial)
STEVEN FINE
Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

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 ▼ 303.14

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8
Transaction ID: A2008-1153057
Amount of Each Receipt this Period 25.52

SUBTOTAL of Receipts This Page (optional) ► 78.66

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 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) STEVEN FINE		Date of Receipt
	Mailing Address 40375 N. SEA EAGLE CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	ANTIOCH	IL	60002
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152622
Name of Employer Allstate Insurance Company		Occupation Sales 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 ▼ <input type="text"/> 328.66	<input type="text"/> 25.52

B.	Full Name (Last, First, Middle Initial) DARYLL D FLETCHER		Date of Receipt
	Mailing Address 22256 W MASHI CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City	State	Zip Code
	IVANHOE	IL	60060
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153180
Name of Employer Allstate Insurance Company		Occupation VP-KNOWLEDGE DEVELOPMENT	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"/> 338.60	<input type="text"/> 28.45

C.	Full Name (Last, First, Middle Initial) DARYLL D FLETCHER		Date of Receipt
	Mailing Address 22256 W MASHI CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	IVANHOE	IL	60060
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152743
Name of Employer Allstate Insurance Company		Occupation VP-KNOWLEDGE DEVELOPMENT	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"/> 367.05	<input type="text"/> 28.45

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 82.42
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 67 / 242
	<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) KELLY F FOGARTY		Date of Receipt
	Mailing Address 613 REX		<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 06 / 06 / 2008
	City	State	Zip Code
	ELMHURST	IL	60126
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153204
Name of Employer Allstate Insurance Company		Occupation AVP Specialty Lines	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 ▼ 455.32	<input type="text"/> 38.56

B.	Full Name (Last, First, Middle Initial) KELLY F FOGARTY		Date of Receipt
	Mailing Address 613 REX		<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 06 / 20 / 2008
	City	State	Zip Code
	ELMHURST	IL	60126
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152767
Name of Employer Allstate Insurance Company		Occupation AVP Specialty Lines	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 ▼ 493.88	<input type="text"/> 38.56

C.	Full Name (Last, First, Middle Initial) ANGELA K FONTANA		Date of Receipt
	Mailing Address 1280 WILD ROSE LANE		<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 06 / 06 / 2008
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153368
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	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 ▼ 206.26	<input type="text"/> 18.04

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 95.16
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 68 / 242
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
ANGELA K FONTANA

Mailing Address 1280 WILD ROSE 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 Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.30

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152931

Amount of Each Receipt this Period
18.04

B.

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 ▼ 594.48

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153131

Amount of Each Receipt this Period
-148.62

C.

Full Name (Last, First, Middle Initial)
KARL A FRIEDMAN

Mailing Address 333 DUNLEER DRIVE

City State Zip Code
CARY IL 60013

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

Name of Employer Allstate Insurance Company Occupation Allstate Financial Senior

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.66

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153227

Amount of Each Receipt this Period
17.43

SUBTOTAL of Receipts This Page (optional) ► **-113.15**

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 69 / 242
	(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) KARL A FRIEDMAN		Date of Receipt
	Mailing Address 333 DUNLEER DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	CARY	IL	60013
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152790
Name of Employer Allstate Insurance Company		Occupation Allstate Financial Senior	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"/> 17.43
		<input type="text"/> 225.09	

B.	Full Name (Last, First, Middle Initial) MATTHEW D FULLER		Date of Receipt
	Mailing Address 350 EDGE FIELD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1153130
Name of Employer Allstate Insurance Company		Occupation Marketing 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 ▼	<input type="text"/> 39.77
		<input type="text"/> 477.24	

C.	Full Name (Last, First, Middle Initial) MATTHEW D FULLER		Date of Receipt
	Mailing Address 350 EDGE FIELD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152694
Name of Employer Allstate Insurance Company		Occupation Marketing 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 ▼	<input type="text"/> 39.77
		<input type="text"/> 517.01	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 96.97
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: PAGE 70 / 242
(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

<p>A. Full Name (Last, First, Middle Initial) ANGELA FUSCO</p> <p>Mailing Address 22255 MASHIE CT</p> <p>City State Zip Code IVANHOE IL 60060</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Senior Sales Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.59</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153067</p> <p>Amount of Each Receipt this Period 29.67</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) ANGELA FUSCO</p> <p>Mailing Address 22255 MASHIE CT</p> <p>City State Zip Code IVANHOE IL 60060</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Senior Sales Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 380.26</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152632</p> <p>Amount of Each Receipt this Period 29.67</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) VINCENT A FUSCO</p> <p>Mailing Address 6 SUGAR MAPLE COURT</p> <p>City State Zip Code DIX HILLS NY 11746</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Vice President Field</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 279.06</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153014</p> <p>Amount of Each Receipt this Period 23.68</p>
--	---

SUBTOTAL of Receipts This Page (optional)	83.02
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 71 / 242
(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)
VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

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 ▼ 302.74

Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152580

Amount of Each Receipt this Period 23.68

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

Mailing Address 2321 WEST STEEPLECHASE

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 & Assistan

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.01

Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153071

Amount of Each Receipt this Period 60.98

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

Mailing Address 2321 WEST STEEPLECHASE

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 & Assistan

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 780.99

Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152636

Amount of Each Receipt this Period 60.98

SUBTOTAL of Receipts This Page (optional) 145.64

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: (check only one)	PAGE 72 / 242
	<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) 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 06 / 06 / 2008
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153369
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 ▼ 837.27	<input type="text"/> 70.91

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 06 / 20 / 2008
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152932
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 ▼ 908.18	<input type="text"/> 70.91

C.	Full Name (Last, First, Middle Initial) JOSEPH E GARNETT		Date of Receipt
	Mailing Address 507 OLD WALNUT CIRCLE		<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 06 / 06 / 2008
	City	State	Zip Code
	GURNEE	IL	60031
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153022
Name of Employer Allstate Insurance Company		Occupation Bank Cash Management Dire	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 ▼ 230.42	<input type="text"/> 19.36

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 161.18
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 73 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JOSEPH E GARNETT		Date of Receipt
	Mailing Address 507 OLD WALNUT CIRCLE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	GURNEE	IL	60031
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152588
Name of Employer Allstate Insurance Company		Occupation Bank Cash Management Dire	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 ▼ 249.78	<input type="text"/> 19.36

B.	Full Name (Last, First, Middle Initial) LYNN A GEHANT		Date of Receipt
	Mailing Address 23W650 WOODWORTH PLACE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City	State	Zip Code
	ROSELLE	IL	60172
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1153214
Name of Employer Allstate Insurance Company		Occupation Senior State Manager	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 ▼ 440.40	<input type="text"/> 37.15

C.	Full Name (Last, First, Middle Initial) LYNN A GEHANT		Date of Receipt
	Mailing Address 23W650 WOODWORTH PLACE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	ROSELLE	IL	60172
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152777
Name of Employer Allstate Insurance Company		Occupation Senior State Manager	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 ▼ 477.55	<input type="text"/> 37.15

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 93.66
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 74 / 242
(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)
NICK GEORGAKOPOULOS

Mailing Address 1846 N. HALSTED ST. #2

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation Finance & Planning Senior

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 214.57

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152803

Amount of Each Receipt this Period
16.99

B. Full Name (Last, First, Middle Initial)
BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60195

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

Name of Employer Allstate Insurance Company Occupation AVP State Team

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.73

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153370

Amount of Each Receipt this Period
31.44

C. Full Name (Last, First, Middle Initial)
BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60195

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

Name of Employer Allstate Insurance Company Occupation AVP State Team

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 404.17

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152933

Amount of Each Receipt this Period
31.44

SUBTOTAL of Receipts This Page (optional) ► 79.87

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 75 / 242
(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)
JOAN GILMORE
Mailing Address 656 S BUCKINGHAM CT
City LAKE FOREST State IL Zip Code 60045
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 ▼ 534.10
Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153019
Amount of Each Receipt this Period 39.77

B. Full Name (Last, First, Middle Initial)
JOAN GILMORE
Mailing Address 656 S BUCKINGHAM CT
City LAKE FOREST State IL Zip Code 60045
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 ▼ 573.87
Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152585
Amount of Each Receipt this Period 39.77

C. Full Name (Last, First, Middle Initial)
MARLA F GLABE
Mailing Address 83 CARIBOU CROSSING
City NORTHBROOK State IL Zip Code 60062
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 869.55
Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153258
Amount of Each Receipt this Period 73.50

SUBTOTAL of Receipts This Page (optional) ► 153.04
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 76 / 242
	<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	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 83 CARIBOU CROSSING	Transaction ID: A2008-1152821
	City NORTHBROOK State IL Zip Code 60062	Amount of Each Receipt this Period 73.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 943.05	

B.	Full Name (Last, First, Middle Initial) ROBERT J GLOD	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1016 N. DERBYSHIRE	Transaction ID: A2008-1153187
	City ARLINGTON HTS State IL Zip Code 60004	Amount of Each Receipt this Period 18.62
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Operations Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 223.44	

C.	Full Name (Last, First, Middle Initial) ROBERT J GLOD	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1016 N. DERBYSHIRE	Transaction ID: A2008-1152750
	City ARLINGTON HTS State IL Zip Code 60004	Amount of Each Receipt this Period 18.62
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Operations Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 242.06	

SUBTOTAL of Receipts This Page (optional)	110.74
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 77 / 242
(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 T GOFF

Mailing Address 124 FLEETS COVE ROAD

City State Zip Code
HUNTINGTON NY 11743

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

Name of Employer Allstate Insurance Company Occupation Field Product Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.55

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152586

Amount of Each Receipt this Period
16.35

B. Full Name (Last, First, Middle Initial)
BARBARA H GOHR

Mailing Address 1601 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 AVP Administrative Operat

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.24

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153118

Amount of Each Receipt this Period
27.97

C. Full Name (Last, First, Middle Initial)
BARBARA H GOHR

Mailing Address 1601 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 AVP Administrative Operat

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 358.21

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152682

Amount of Each Receipt this Period
27.97

SUBTOTAL of Receipts This Page (optional) ▶ **72.29**

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 78 / 242
(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)
BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS 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 ▼ 260.14

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153172

Amount of Each Receipt this Period
19.88

B.

Full Name (Last, First, Middle Initial)
BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS 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 ▼ 280.02

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152735

Amount of Each Receipt this Period
19.88

C.

Full Name (Last, First, Middle Initial)
DENNIS C GOMEZ

Mailing Address 3 ROBERT COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Vice President Human Reso

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 854.63

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153047

Amount of Each Receipt this Period
186.18

SUBTOTAL of Receipts This Page (optional) ► 225.94

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 79 / 242

(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)
BRIAN D GORE

Mailing Address 834 Greenwood Dr

City State Zip Code
Lindenhurst IL 60046

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

Name of Employer Occupation
Allstate Insurance Company Claims Project Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 202.14

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152582

Amount of Each Receipt this Period

15.78

B.

Full Name (Last, First, Middle Initial)
ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Occupation
Allstate Insurance Company Associate Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 388.80

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153422

Amount of Each Receipt this Period

32.80

C.

Full Name (Last, First, Middle Initial)
ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Occupation
Allstate Insurance Company Associate Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 421.60

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152985

Amount of Each Receipt this Period

32.80

SUBTOTAL of Receipts This Page (optional)

81.38

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 242
	<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 F GRAWE		Date of Receipt MM / DD / YYYY 06 / 06 / 2008		
	Mailing Address 18799 GUNN HIGHWAY		Transaction ID: A2008-1153115		
	City ODESSA	State FL	Zip Code 33556	Amount of Each Receipt this Period 19.88	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation Home Office Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 238.56			

B.	Full Name (Last, First, Middle Initial) GEORGE F GRAWE		Date of Receipt MM / DD / YYYY 06 / 20 / 2008		
	Mailing Address 18799 GUNN HIGHWAY		Transaction ID: A2008-1152679		
	City ODESSA	State FL	Zip Code 33556	Amount of Each Receipt this Period 19.88	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation Home Office Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 258.44			

C.	Full Name (Last, First, Middle Initial) PAMELA P GRAY		Date of Receipt MM / DD / YYYY 06 / 06 / 2008		
	Mailing Address 50 E. BELLEVUE PL. #2402		Transaction ID: A2008-1153347		
	City CHICAGO	State IL	Zip Code 60611	Amount of Each Receipt this Period 26.59	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation Data Center Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 314.88			

SUBTOTAL of Receipts This Page (optional)	▶	66.35
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 81 / 242
	<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) PAMELA P GRAY		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 50 E. BELLEVUE PL. #2402		Transaction ID: A2008-1152912
	City CHICAGO	State IL	Zip Code 60611
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.59
	Name of Employer Allstate Insurance Company	Occupation Data Center Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 341.47	

B.	Full Name (Last, First, Middle Initial) JUDITH P GREFFIN		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 948 NORTH EUCLID AVENUE		Transaction ID: A2008-1153135
	City OAK PARK	State IL	Zip Code 60302
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 48.51
	Name of Employer Allstate Insurance Company	Occupation Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 570.32	

C.	Full Name (Last, First, Middle Initial) JUDITH P GREFFIN		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 948 NORTH EUCLID AVENUE		Transaction ID: A2008-1152698
	City OAK PARK	State IL	Zip Code 60302
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 48.51
	Name of Employer Allstate Insurance Company	Occupation Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 618.83	

SUBTOTAL of Receipts This Page (optional)	▶	123.61
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 82 / 242						
	(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

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) ANN M GROSS		Date of Receipt	
	Mailing Address 91 STABLE WAY		M M / D D / Y Y Y Y Y 06 / 06 / 2008	
	City	State	Zip Code	Transaction ID: A2008-1153025
	LINDENHURST	IL	60046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		23.94	
Name of Employer Allstate Insurance Company		Occupation Education and Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 282.68		

B.	Full Name (Last, First, Middle Initial) ANN M GROSS		Date of Receipt	
	Mailing Address 91 STABLE WAY		M M / D D / Y Y Y Y Y 06 / 20 / 2008	
	City	State	Zip Code	Transaction ID: A2008-1152591
	LINDENHURST	IL	60046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		23.94	
Name of Employer Allstate Insurance Company		Occupation Education and Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 306.62		

C.	Full Name (Last, First, Middle Initial) GREGORY J GUIDOS		Date of Receipt	
	Mailing Address 804 QUEENS HARBOR BLVD		M M / D D / Y Y Y Y Y 06 / 06 / 2008	
	City	State	Zip Code	Transaction ID: A2008-1153314
	JACKSONVILLE	FL	32225	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		22.93	
Name of Employer Allstate Insurance Company		Occupation AVP Finance AFW		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 272.06		

SUBTOTAL of Receipts This Page (optional)	▶	70.81
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 83 / 242
	<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) GREGORY J GUIDOS		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 804 QUEENS HARBOR BLVD		Transaction ID: A2008-1152879
	City	State	Zip Code
	JACKSONVILLE	FL	32225
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.93
Name of Employer Allstate Insurance Company		Occupation AVP Finance AFW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.99	

B.	Full Name (Last, First, Middle Initial) JOHN F HAAS		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 6509 E. BETTY ELYSE LANE		Transaction ID: A2008-1153400
	City	State	Zip Code
	SCOTTSDALE	AZ	85254
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.09
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.33	

C.	Full Name (Last, First, Middle Initial) JOHN F HAAS		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 6509 E. BETTY ELYSE LANE		Transaction ID: A2008-1152963
	City	State	Zip Code
	SCOTTSDALE	AZ	85254
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.09
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.42	

SUBTOTAL of Receipts This Page (optional)	▶	61.11
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 84 / 242
(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 N. BARRINGTON State IL Zip Code 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 ▼ 648.67
Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153268
Amount of Each Receipt this Period 55.36

B. Full Name (Last, First, Middle Initial)
JAMES W HAIDU
Mailing Address 3 South Wynstone
City N. BARRINGTON State IL Zip Code 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 ▼ 704.03
Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152831
Amount of Each Receipt this Period 55.36

C. Full Name (Last, First, Middle Initial)
ROBERT F HAIR
Mailing Address 17 NORTH TRAIL
City HAWTHORN WOODS State IL Zip Code 60047
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior State Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 313.91
Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153423
Amount of Each Receipt this Period 26.48

SUBTOTAL of Receipts This Page (optional) ► 137.20
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 85 / 242
	<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 F HAIR

Mailing Address 17 NORTH TRAIL

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.39

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152986

Amount of Each Receipt this Period
26.48

B. Full Name (Last, First, Middle Initial)
ROBERT HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation Human Resource Senior Man

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.28

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153292

Amount of Each Receipt this Period
17.19

C. Full Name (Last, First, Middle Initial)
ROBERT HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation Human Resource Senior Man

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 223.47

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152856

Amount of Each Receipt this Period
17.19

SUBTOTAL of Receipts This Page (optional) ▶ **60.86**

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 86 / 242
(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)
RANDALL M HANSON
Mailing Address 840 ALLEGHANY

City State Zip Code
GRAYSLAKE IL 60030

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 ▼ 383.31

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153378

Amount of Each Receipt this Period
32.70

B. Full Name (Last, First, Middle Initial)
RANDALL M HANSON
Mailing Address 840 ALLEGHANY

City State Zip Code
GRAYSLAKE IL 60030

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 ▼ 416.01

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152941

Amount of Each Receipt this Period
32.70

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 ▼ 1590.60

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153427

Amount of Each Receipt this Period
132.55

SUBTOTAL of Receipts This Page (optional) ► 197.95

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 87 / 242
(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 ▼
1723.15

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152990

Amount of Each Receipt this Period
132.55

B.

Full Name (Last, First, Middle Initial)
FREDRICH A HATCH

Mailing Address 8313 STRATHMORE LANE

City State Zip Code
ROANOKE VA 24019

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

Name of Employer
Allstate Insurance Company

Occupation
Territory Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.55

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152959

Amount of Each Receipt this Period
16.35

C.

Full Name (Last, First, Middle Initial)
KEITH A HAUSCHILDT

Mailing Address 636 ROSEDALE AVE

City State Zip Code
ROSELLE IL 60172

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

Name of Employer
Allstate Insurance Company

Occupation
AVP AF Operations & Techn

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.59

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152692

Amount of Each Receipt this Period
16.38

SUBTOTAL of Receipts This Page (optional) ► **165.28**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 242

(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 ▼ 796.20

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153126

Amount of Each Receipt this Period

67.30

B.

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 ▼ 863.50

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152690

Amount of Each Receipt this Period

67.30

C.

Full Name (Last, First, Middle Initial)
RICHARD J HENEBERRY

Mailing Address 23 CLAYTON

City State Zip Code
LAKE VILLA IL 60046

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

Name of Employer Occupation
Allstate Insurance Company AVP Intract Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 293.88

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153153

Amount of Each Receipt this Period

24.89

SUBTOTAL of Receipts This Page (optional) ▶

159.49

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 89 / 242

(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 J HENEBERRY

Mailing Address 23 CLAYTON

City State Zip Code
LAKE VILLA IL 60046

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

Name of Employer Occupation
Allstate Insurance Company AVP Intract Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 318.77

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152716

Amount of Each Receipt this Period

24.89

B.

Full Name (Last, First, Middle Initial)

ROBERT L HERRING

Mailing Address 4337 SPRUCE BOUGH DR

City State Zip Code
MARIETTA GA 30062

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

Name of Employer Occupation
Allstate Insurance Company Distribution Support Lead

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 377.45

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153341

Amount of Each Receipt this Period

32.15

C.

Full Name (Last, First, Middle Initial)

ROBERT L HERRING

Mailing Address 4337 SPRUCE BOUGH DR

City State Zip Code
MARIETTA GA 30062

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

Name of Employer Occupation
Allstate Insurance Company Distribution Support Lead

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 409.60

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152906

Amount of Each Receipt this Period

32.15

SUBTOTAL of Receipts This Page (optional) ▶

89.19

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

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

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

FOR LINE NUMBER: PAGE 90 / 242
(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 LINDENHURST State IL Zip Code 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 ▼ 1031.82

Date of Receipt 06 / 06 / 2008

Transaction ID: A2008-1153092

Amount of Each Receipt this Period 88.06

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

Mailing Address 2935 GLENARYE DRIVE

City LINDENHURST State IL Zip Code 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 ▼ 1119.88

Date of Receipt 06 / 20 / 2008

Transaction ID: A2008-1152656

Amount of Each Receipt this Period 88.06

C. Full Name (Last, First, Middle Initial)
SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.88

Date of Receipt 06 / 20 / 2008

Transaction ID: A2008-1152809

Amount of Each Receipt this Period 15.91

SUBTOTAL of Receipts This Page (optional) ► 192.03

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: PAGE 91 / 242 (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

<p>A. Full Name (Last, First, Middle Initial) James Hohmann</p> <p>Mailing Address 2775 Sanders Road Suite A5</p> <p>City State Zip Code Northbrook IL 60062</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Allstate Insurance Company Occupation: Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 263.54</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153434</p> <p>Amount of Each Receipt this Period 131.77</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) James Hohmann</p> <p>Mailing Address 2775 Sanders Road Suite A5</p> <p>City State Zip Code Northbrook IL 60062</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Allstate Insurance Company Occupation: Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 395.31</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152998</p> <p>Amount of Each Receipt this Period 131.77</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) LINDA M HONOUR</p> <p>Mailing Address 8 PELHAM ROAD</p> <p>City State Zip Code WESTON MA 02493</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Allstate Insurance Company Occupation: Assistant Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 532.01</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153430</p> <p>Amount of Each Receipt this Period 45.23</p>
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SUBTOTAL of Receipts This Page (optional)	308.77
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 92 / 242
	(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) LINDA M HONOUR		Date of Receipt
	Mailing Address 8 PELHAM 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 06 / 20 / 2008
	City	State	Zip Code
	WESTON	MA	02493
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152994
Name of Employer Allstate Insurance Company		Occupation Assistant Vice President	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 ▼ 577.24	<input type="text"/> 45.23

B.	Full Name (Last, First, Middle Initial) MERRILD A HOOVER		Date of Receipt
	Mailing Address 49 DORAL STREET		<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 06 / 06 / 2008
	City	State	Zip Code
	HURRICANE	WV	25526
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1153095
Name of Employer Allstate Insurance Company		Occupation Market Distribution Leade	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 ▼ 276.92	<input type="text"/> 23.36

C.	Full Name (Last, First, Middle Initial) MERRILD A HOOVER		Date of Receipt
	Mailing Address 49 DORAL STREET		<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 06 / 20 / 2008
	City	State	Zip Code
	HURRICANE	WV	25526
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152659
Name of Employer Allstate Insurance Company		Occupation Market Distribution Leade	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 ▼ 300.28	<input type="text"/> 23.36

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 91.95
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 93 / 242
(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)
F M HORD

Mailing Address 1937 Veterans Blvd

City State Zip Code
Metairie LA 70005

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153145

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
F M HORD

Mailing Address 1937 Veterans Blvd

City State Zip Code
Metairie LA 70005

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 382.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152708

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

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

Name of Employer Allstate Insurance Company Occupation Communication Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.56

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153333

Amount of Each Receipt this Period
19.88

SUBTOTAL of Receipts This Page (optional) ► 79.88

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 94 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MARY L HUBER		Date of Receipt
	Mailing Address 1532 NORTH BELMONT AVE.		<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 6 / 2 0 / 2 0 0 8
	City	State	Zip Code
	ARLINGTON HTS.	IL	60004
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152898
Name of Employer Allstate Insurance Company		Occupation Communication 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 ▼	<input type="text"/> 19.88
		<input type="text"/> 258.44	

B.	Full Name (Last, First, Middle Initial) STEPHEN L IHM		Date of Receipt
	Mailing Address 21558 W GOLDFINCH CT		<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 6 / 0 6 / 2 0 0 8
	City	State	Zip Code
	KILDEER	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153243
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	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"/> 45.22
		<input type="text"/> 533.94	

C.	Full Name (Last, First, Middle Initial) STEPHEN L IHM		Date of Receipt
	Mailing Address 21558 W GOLDFINCH CT		<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 6 / 2 0 / 2 0 0 8
	City	State	Zip Code
	KILDEER	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152806
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	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"/> 45.22
		<input type="text"/> 579.16	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 110.32
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 95 / 242
(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)
LYNNE A IVERSON
 Mailing Address 890 BLAZING STAR TRAIL
 City State Zip Code
 CARY IL 60013
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 6 / 2 0 0 8
Transaction ID: A2008-1153195
 Amount of Each Receipt this Period
 28.15
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior Sourcing Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.70

B. Full Name (Last, First, Middle Initial)
LYNNE A IVERSON
 Mailing Address 890 BLAZING STAR TRAIL
 City State Zip Code
 CARY IL 60013
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 8
Transaction ID: A2008-1152758
 Amount of Each Receipt this Period
 28.15
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior Sourcing Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.85

C. Full Name (Last, First, Middle Initial)
MICHAEL A JACKOWSKI
 Mailing Address 3602 FRANKLIN CT.
 City State Zip Code
 CRYSTAL LAKE IL 60014
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 6 / 2 0 0 8
Transaction ID: A2008-1153173
 Amount of Each Receipt this Period
 79.49
 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 ▼ 938.58

SUBTOTAL of Receipts This Page (optional) ► 135.79
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 96 / 242
(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)
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 ▼ 1018.07

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152736

Amount of Each Receipt this Period
79.49

B. Full Name (Last, First, Middle Initial)
BOB A JACKSON

Mailing Address 226 Maison Court

City State Zip Code
Altamonte Springs FL 32714

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.96

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153388

Amount of Each Receipt this Period
21.08

C. Full Name (Last, First, Middle Initial)
BOB A JACKSON

Mailing Address 226 Maison Court

City State Zip Code
Altamonte Springs FL 32714

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 268.04

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152951

Amount of Each Receipt this Period
21.08

SUBTOTAL of Receipts This Page (optional) ► 121.65

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: (check only one)	PAGE 97 / 242
	<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) JAMES C JAMIESON	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 25 BRUCE CIRCLE NORTH	Transaction ID: A2008-1153167
	City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 32.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation F&P/Enterprise Risk Manag Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 389.40	

B.	Full Name (Last, First, Middle Initial) JAMES C JAMIESON	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 25 BRUCE CIRCLE NORTH	Transaction ID: A2008-1152730
	City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 32.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation F&P/Enterprise Risk Manag Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 422.25	

C.	Full Name (Last, First, Middle Initial) DOLORES M JOSSUND	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 4242 W. HARRINGTON LANE	Transaction ID: A2008-1153228
	City State Zip Code CHICAGO IL 60646	Amount of Each Receipt this Period 39.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 477.24	

SUBTOTAL of Receipts This Page (optional)	▶	105.47
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 98 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) DOLORES M JOSSUND		Date of Receipt
	Mailing Address 4242 W. HARRINGTON LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	CHICAGO	IL	60646
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152791
Name of Employer Allstate Insurance Company		Occupation Sales 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 ▼ 517.01	<input type="text"/>
			39.77

B.	Full Name (Last, First, Middle Initial) JOHN A KANE		Date of Receipt
	Mailing Address 1 LONGLEY PLACE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	HUNTINGTON STA	NY	11746
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153023
Name of Employer Allstate Insurance Company		Occupation Territorial Distribution	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 ▼ 213.98	<input type="text"/>
			18.98

C.	Full Name (Last, First, Middle Initial) JOHN A KANE		Date of Receipt
	Mailing Address 1 LONGLEY PLACE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	HUNTINGTON STA	NY	11746
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152589
Name of Employer Allstate Insurance Company		Occupation Territorial Distribution	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 ▼ 232.96	<input type="text"/>
			18.98

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>
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 99 / 242
	<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) TIMOTHY M KATHRENS		Date of Receipt
	Mailing Address 703 HIGHLAND CT		<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 6 / 2 0 / 2 0 0 8
	City	State	Zip Code
	GRAYSLAKE	IL	60030
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152888
Name of Employer Allstate Insurance Company		Occupation CC IT Senior Manager	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 ▼ 206.43	<input type="text"/> 16.06

B.	Full Name (Last, First, Middle Initial) JEFF L KAUFMAN		Date of Receipt
	Mailing Address 5271 SERENE VIEW 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 0 6 / 0 6 / 2 0 0 8
	City	State	Zip Code
	PARKER	CO	80134
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153394
Name of Employer Allstate Insurance Company		Occupation Vice President Field	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 ▼ 996.96	<input type="text"/> 83.08

C.	Full Name (Last, First, Middle Initial) JEFF L KAUFMAN		Date of Receipt
	Mailing Address 5271 SERENE VIEW 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 0 6 / 2 0 / 2 0 0 8
	City	State	Zip Code
	PARKER	CO	80134
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152957
Name of Employer Allstate Insurance Company		Occupation Vice President Field	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 ▼ 1080.04	<input type="text"/> 83.08

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 182.22
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 100 / 242
	<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) MARY KEITH		Date of Receipt
	Mailing Address 2309 RFD		<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 06 / 06 / 2008
	City	State	Zip Code
	LONG GROVE	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153419
Name of Employer Allstate Insurance Company		Occupation Finance 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 ▼ <input type="text"/> 208.21	<input type="text"/> 17.53

B.	Full Name (Last, First, Middle Initial) MARY KEITH		Date of Receipt
	Mailing Address 2309 RFD		<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 06 / 20 / 2008
	City	State	Zip Code
	LONG GROVE	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152982
Name of Employer Allstate Insurance Company		Occupation Finance 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 ▼ <input type="text"/> 225.74	<input type="text"/> 17.53

C.	Full Name (Last, First, Middle Initial) TERRY KELAHER		Date of Receipt
	Mailing Address 924 W. CHESTERFIELD CT.		<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 06 / 06 / 2008
	City	State	Zip Code
	PALATINE	IL	60067
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153238
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"/> 978.90	<input type="text"/> 82.25

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 117.31
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 101 / 242

(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)
TERRY KELAHER

Mailing Address 924 W. CHESTERFIELD CT.

City State Zip Code
PALATINE IL 60067

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

Name of Employer Occupation
Allstate Insurance Company Vice President & General

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1061.15

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152801

Amount of Each Receipt this Period

82.25

B.

Full Name (Last, First, Middle Initial)
DAVID E KENNEY

Mailing Address 622 SEDGWICK DR.

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Sales Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.26

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153269

Amount of Each Receipt this Period

19.88

C.

Full Name (Last, First, Middle Initial)
DAVID E KENNEY

Mailing Address 622 SEDGWICK DR.

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Sales Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 278.01

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152832

Amount of Each Receipt this Period

39.75

SUBTOTAL of Receipts This Page (optional) ▶

141.88

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 102 / 242
(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)
DARON K KERSTEN

Mailing Address 548 TIMBER RIDGE DR

City State Zip Code
LONGWOOD FL 32779

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.18

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153111

Amount of Each Receipt this Period
23.54

B.

Full Name (Last, First, Middle Initial)
DARON K KERSTEN

Mailing Address 548 TIMBER RIDGE DR

City State Zip Code
LONGWOOD FL 32779

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 303.72

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152675

Amount of Each Receipt this Period
23.54

C.

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 ▼ 529.48

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153005

Amount of Each Receipt this Period
44.84

SUBTOTAL of Receipts This Page (optional) ► 91.92

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 242
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
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 ▼ 574.32

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152572

Amount of Each Receipt this Period
44.84

B.

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

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.75

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153169

Amount of Each Receipt this Period
38.75

C.

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

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 494.50

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152732

Amount of Each Receipt this Period
38.75

SUBTOTAL of Receipts This Page (optional) ► **122.34**

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 104 / 242
(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)
PAUL N KIERIG

Mailing Address 200 OXFORD RD

City State Zip Code
Tower Lakes IL 60010

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 ▼ 298.57

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153222

Amount of Each Receipt this Period

25.16

B.

Full Name (Last, First, Middle Initial)
PAUL N KIERIG

Mailing Address 200 OXFORD RD

City State Zip Code
Tower Lakes IL 60010

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 ▼ 323.73

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152785

Amount of Each Receipt this Period

25.16

C.

Full Name (Last, First, Middle Initial)
BARBARA L KILROY

Mailing Address 1036 VINEYARD DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Occupation
Allstate Insurance Company Audit Director

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 213.94

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153080

Amount of Each Receipt this Period

18.12

SUBTOTAL of Receipts This Page (optional)

68.44

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 105 / 242
(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)
BARBARA L KILROY

Mailing Address 1036 VINEYARD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Audit Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 232.06

Date of Receipt MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152644

Amount of Each Receipt this Period 18.12

B. Full Name (Last, First, Middle Initial)
JAMES P KING

Mailing Address 592 TURNER AVENUE

City State Zip Code
GLEN ELLYN IL 60137

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 ▼ 433.25

Date of Receipt MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153297

Amount of Each Receipt this Period 36.55

C. Full Name (Last, First, Middle Initial)
JAMES P KING

Mailing Address 592 TURNER AVENUE

City State Zip Code
GLEN ELLYN IL 60137

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 469.80

Date of Receipt MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152861

Amount of Each Receipt this Period 36.55

SUBTOTAL of Receipts This Page (optional) 91.22

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 106 / 242
(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)
LAURA S KISTNER

Mailing Address 22047 W. PETOSKEY CT

City State Zip Code
PLAINFIELD IL 60544

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

Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.36

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153354

Amount of Each Receipt this Period
17.83

B.

Full Name (Last, First, Middle Initial)
LAURA S KISTNER

Mailing Address 22047 W. PETOSKEY CT

City State Zip Code
PLAINFIELD IL 60544

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

Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.19

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152919

Amount of Each Receipt this Period
17.83

C.

Full Name (Last, First, Middle Initial)
KEITH A KNAPP

Mailing Address 175 Macarthur Dr #3712

City State Zip Code
Willowbrook IL 60527

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

Name of Employer Allstate Insurance Company Occupation Director DSN & CONST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 217.85

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153139

Amount of Each Receipt this Period
18.45

SUBTOTAL of Receipts This Page (optional) ► **54.11**

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 107 / 242
(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)
KEITH A KNAPP

Mailing Address 175 Macarthur Dr #3712

City Willowbrook State IL Zip Code 60527

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Director DSN & CONST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.30

Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152702

Amount of Each Receipt this Period 18.45

B. Full Name (Last, First, Middle Initial)
JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City NORTHBROOK State IL Zip Code 60062

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 349.69

Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153375

Amount of Each Receipt this Period 29.87

C. Full Name (Last, First, Middle Initial)
JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City NORTHBROOK State IL Zip Code 60062

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 379.56

Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152938

Amount of Each Receipt this Period 29.87

SUBTOTAL of Receipts This Page (optional) 78.19

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 108 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MARY G KNIPP		Date of Receipt
	Mailing Address 2050 GLENDALE 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 6 / 0 6 / 2 0 0 8
	City	State	Zip Code
	NORTHBROOK	IL	60062
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153158
Name of Employer Allstate Insurance Company		Occupation Allstate Financial Market	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"/> 238.56	<input type="text"/> 19.88

B.	Full Name (Last, First, Middle Initial) MARY G KNIPP		Date of Receipt
	Mailing Address 2050 GLENDALE 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 6 / 2 0 / 2 0 0 8
	City	State	Zip Code
	NORTHBROOK	IL	60062
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152721
Name of Employer Allstate Insurance Company		Occupation Allstate Financial Market	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"/> 258.44	<input type="text"/> 19.88

C.	Full Name (Last, First, Middle Initial) GARY L KOCHANЕК		Date of Receipt
	Mailing Address 743 CARDIGAN CT		<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 6 / 0 6 / 2 0 0 8
	City	State	Zip Code
	NAPERVILLE	IL	60565
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153175
Name of Employer Allstate Insurance Company		Occupation Claims Senior Manager	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"/> 392.40	<input type="text"/> 32.70

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 72.46
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 109 / 242
(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)
GARY L KOCHANЕК

Mailing Address 743 CARDIGAN CT

City State Zip Code
NAPERVILLE IL 60565

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 ▼ 425.10

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152738

Amount of Each Receipt this Period
32.70

B. Full Name (Last, First, Middle Initial)
JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City State Zip Code
VERNON HILLS IL 60061

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 ▼ 541.96

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 06 / 2008

Transaction ID: A2008-1153171

Amount of Each Receipt this Period
39.77

C. Full Name (Last, First, Middle Initial)
JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City State Zip Code
VERNON HILLS IL 60061

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 ▼ 581.73

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152734

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional) ► **112.24**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 / 242
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
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 ▼ 816.93

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153226

Amount of Each Receipt this Period
68.64

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 ▼ 885.57

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152789

Amount of Each Receipt this Period
68.64

C.

Full Name (Last, First, Middle Initial)
ANTHONY LASKA

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 549.17

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153027

Amount of Each Receipt this Period
46.51

SUBTOTAL of Receipts This Page (optional) ► **183.79**

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 111 / 242
	(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) ANTHONY LASKA		Date of Receipt
	Mailing Address 2707 SKYLINE DRIVE		<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 06 / 20 / 2008
	City	State	Zip Code
	CRYSTAL LAKE	IL	60012
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152593
Name of Employer Allstate Insurance Company		Occupation AVP Technology Shared Ser	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 ▼ 595.68	<input type="text"/> 46.51

B.	Full Name (Last, First, Middle Initial) DEBORAH G LAWRENCE		Date of Receipt
	Mailing Address 910 S MICHIGAN AVE #1501		<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 06 / 06 / 2008
	City	State	Zip Code
	CHICAGO	IL	60605
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153146
Name of Employer Allstate Insurance Company		Occupation Human Resource 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 ▼ 238.56	<input type="text"/> 19.88

C.	Full Name (Last, First, Middle Initial) DEBORAH G LAWRENCE		Date of Receipt
	Mailing Address 910 S MICHIGAN AVE #1501		<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 06 / 20 / 2008
	City	State	Zip Code
	CHICAGO	IL	60605
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152709
Name of Employer Allstate Insurance Company		Occupation Human Resource 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 ▼ 258.44	<input type="text"/> 19.88

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 86.27
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 112 / 242
	<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) PHILLIP E LAWSON		Date of Receipt
	Mailing Address 900 PARK AVENUE NORTH		<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 6 / 0 6 / 2 0 0 8
	City	State	Zip Code
	WINTER PARK	FL	32789
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153382
Name of Employer Allstate Insurance Company		Occupation Vice President Field	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"/> 75.96
		<input type="text"/> 896.92	

B.	Full Name (Last, First, Middle Initial) PHILLIP E LAWSON		Date of Receipt
	Mailing Address 900 PARK AVENUE NORTH		<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 6 / 2 0 / 2 0 0 8
	City	State	Zip Code
	WINTER PARK	FL	32789
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152945
Name of Employer Allstate Insurance Company		Occupation Vice President Field	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"/> 75.96
		<input type="text"/> 972.88	

C.	Full Name (Last, First, Middle Initial) CATHY A LAZAROFF		Date of Receipt
	Mailing Address 910 S MICHIGAN AVE #1503		<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 6 / 0 6 / 2 0 0 8
	City	State	Zip Code
	CHICAGO	IL	60605
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153013
Name of Employer Allstate Insurance Company		Occupation Vice President Marketing	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"/> 29.36
		<input type="text"/> 669.53	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 181.28
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 113 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MICHELLE LEE		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1404 100TH AVENUE NE		Transaction ID: A2008-1153425
	City BELLEVUE	State WA	Zip Code 98004
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.79
	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 ▼ 717.78	

B.	Full Name (Last, First, Middle Initial) MICHELLE LEE		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1404 100TH AVENUE NE		Transaction ID: A2008-1152988
	City BELLEVUE	State WA	Zip Code 98004
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.79
	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 ▼ 778.57	

C.	Full Name (Last, First, Middle Initial) SUSAN L LEES		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1705 DARTMOUTH LN		Transaction ID: A2008-1153004
	City DEERFIELD	State IL	Zip Code 60015
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.78
	Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 303.21	

SUBTOTAL of Receipts This Page (optional)	▶	147.36
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 114 / 242
(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)
SUSAN L LEES
 Mailing Address 1705 DARTMOUTH LN
 City State Zip Code
 DEERFIELD IL 60015
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 8
Transaction ID: A2008-1152571
 Amount of Each Receipt this Period
 25.78
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel &
 Receipt For: Primary General Aggregate Year-to-Date 328.99
 Other (specify) ▼

B. Full Name (Last, First, Middle Initial)
ANDREW P LEICHT
 Mailing Address 25658 N ARROWHEAD
 City State Zip Code
 MUNDELEIN IL 60060
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 6 / 2 0 0 8
Transaction ID: A2008-1153181
 Amount of Each Receipt this Period
 32.69
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant
 Receipt For: Primary General Aggregate Year-to-Date 392.28
 Other (specify) ▼

C. Full Name (Last, First, Middle Initial)
ANDREW P LEICHT
 Mailing Address 25658 N ARROWHEAD
 City State Zip Code
 MUNDELEIN IL 60060
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 8
Transaction ID: A2008-1152744
 Amount of Each Receipt this Period
 32.69
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant
 Receipt For: Primary General Aggregate Year-to-Date 424.97
 Other (specify) ▼

SUBTOTAL of Receipts This Page (optional) ► 91.16
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 242
(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)
NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City ACWORTH State GA Zip Code 30101

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

Name of Employer Allstate Insurance Company Occupation Senior Field Corporate Re

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153253
 Amount of Each Receipt this Period: 21.80

B.

Full Name (Last, First, Middle Initial)
NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City ACWORTH State GA Zip Code 30101

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

Name of Employer Allstate Insurance Company Occupation Senior Field Corporate Re

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 282.80

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152816
 Amount of Each Receipt this Period: 21.80

C.

Full Name (Last, First, Middle Initial)
KELLY J LIEN

Mailing Address 3 BEDFORD COURT

City HAWTHORN WOODS State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.68

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153403
 Amount of Each Receipt this Period: 18.99

SUBTOTAL of Receipts This Page (optional) ► 62.59

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 116 / 242
(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)
KELLY J LIEN

Mailing Address 3 BEDFORD COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.67

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152966

Amount of Each Receipt this Period
18.99

B.

Full Name (Last, First, Middle Initial)
TERESA G LOGUE

Mailing Address 7187 PRESIDENTIAL DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Direct Response

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.58

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153202

Amount of Each Receipt this Period
23.34

C.

Full Name (Last, First, Middle Initial)
TERESA G LOGUE

Mailing Address 7187 PRESIDENTIAL DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Direct Response

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 298.92

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152765

Amount of Each Receipt this Period
23.34

SUBTOTAL of Receipts This Page (optional) ► 65.67

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 117 / 242
(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 T LONGEWAY

Mailing Address 1134 W. PATTERSON #1

City State Zip Code
CHICAGO IL 60613

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 344.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153237

Amount of Each Receipt this Period
29.17

B.

Full Name (Last, First, Middle Initial)
CHRISTOPHER T LONGEWAY

Mailing Address 1134 W. PATTERSON #1

City State Zip Code
CHICAGO IL 60613

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 373.61

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152800

Amount of Each Receipt this Period
29.17

C.

Full Name (Last, First, Middle Initial)
RICHARD E LOTT

Mailing Address 4666 SW HAMMOCK CREEK DR

City State Zip Code
PALM CITY FL 34990

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

Name of Employer Allstate Insurance Company Occupation Distribution Support Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.47

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152678

Amount of Each Receipt this Period
16.84

SUBTOTAL of Receipts This Page (optional) ► 75.18

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: (check only one)	PAGE 118 / 242
	<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 LOUNDS		Date of Receipt
	Mailing Address 4424 STONEHAVEN		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	LONG GROVE	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153321
Name of Employer Allstate Insurance Company		Occupation Vice President Product AF	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" value="449.49"/>	<input type="text" value="37.92"/>

B.	Full Name (Last, First, Middle Initial) JOHN C LOUNDS		Date of Receipt
	Mailing Address 4424 STONEHAVEN		<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	LONG GROVE	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152886
Name of Employer Allstate Insurance Company		Occupation Vice President Product AF	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" value="487.41"/>	<input type="text" value="37.92"/>

C.	Full Name (Last, First, Middle Initial) COREY C LUECHT		Date of Receipt
	Mailing Address 843 Spring Cove Dr		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	SCHAUMBURG	IL	60193
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153256
Name of Employer Allstate Insurance Company		Occupation Accounting Senior Manager	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" value="230.13"/>	<input type="text" value="19.69"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="95.53"/>
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 119 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) COREY C LUECHT	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 843 Spring Cove Dr	Transaction ID: A2008-1152819
	City State Zip Code SCHAUMBURG IL 60193	Amount of Each Receipt this Period 19.69
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Accounting Senior Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.82

B.	Full Name (Last, First, Middle Initial) BENJAMIN E LUMICAO	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 343 S. DEARBORN ST. APT. 504	Transaction ID: A2008-1153281
	City State Zip Code CHICAGO IL 60604	Amount of Each Receipt this Period 31.86
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Associate Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.22

C.	Full Name (Last, First, Middle Initial) BENJAMIN E LUMICAO	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 343 S. DEARBORN ST. APT. 504	Transaction ID: A2008-1152845
	City State Zip Code CHICAGO IL 60604	Amount of Each Receipt this Period 31.86
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Associate Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 408.08

SUBTOTAL of Receipts This Page (optional)	83.41
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: (check only one)	PAGE 120 / 242
	<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 MACDONALD	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 2250 RIDGETRAIL DR	Transaction ID: A2008-1153332
	City State Zip Code CASTLE ROCK CO 80104	Amount of Each Receipt this Period 28.81
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 339.52	

B.	Full Name (Last, First, Middle Initial) DANIEL J MACDONALD	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2250 RIDGETRAIL DR	Transaction ID: A2008-1152897
	City State Zip Code CASTLE ROCK CO 80104	Amount of Each Receipt this Period 28.81
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 368.33	

C.	Full Name (Last, First, Middle Initial) MORRIS A MADURO	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address PO BOX 4343	Transaction ID: A2008-1153026
	City State Zip Code NAPERVILLE IL 60567	Amount of Each Receipt this Period 39.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 467.64	

SUBTOTAL of Receipts This Page (optional)	▶	97.39
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 121 / 242
(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)
MORRIS A MADURO

Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

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 ▼ 507.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152592

Amount of Each Receipt this Period
39.77

B.

Full Name (Last, First, Middle Initial)
KATHERINE MALCOMSON

Mailing Address 185 NILES EAST

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation Education and Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 232.82

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153318

Amount of Each Receipt this Period
19.56

C.

Full Name (Last, First, Middle Initial)
KATHERINE MALCOMSON

Mailing Address 185 NILES EAST

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation Education and Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.38

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152883

Amount of Each Receipt this Period
19.56

SUBTOTAL of Receipts This Page (optional) ► **78.89**

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 122 / 242
	<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) DENISE MANDIGO	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 38727 N DREXEL	Transaction ID: A2008-1152733
	City State Zip Code ANTIOCH IL 60002	Amount of Each Receipt this Period 16.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 212.55	

B.	Full Name (Last, First, Middle Initial) FELIX A MANTILLA	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 28601 N. Sky Crest Drive	Transaction ID: A2008-1153334
	City State Zip Code Ivanhoe IL 60060	Amount of Each Receipt this Period 48.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel & Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 575.14	

C.	Full Name (Last, First, Middle Initial) FELIX A MANTILLA	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 28601 N. Sky Crest Drive	Transaction ID: A2008-1152899
	City State Zip Code Ivanhoe IL 60060	Amount of Each Receipt this Period 48.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel & Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 623.66	

SUBTOTAL of Receipts This Page (optional)	113.39
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 123 / 242
(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)
KENNETH P MARCOTTE
Mailing Address 2311 HAVERTON DR
City State Zip Code
MUNDELEIN IL 60060
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Finance Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 221.88
Date of Receipt M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8
Transaction ID: A2008-1153186
Amount of Each Receipt this Period 18.79

B. Full Name (Last, First, Middle Initial)
KENNETH P MARCOTTE
Mailing Address 2311 HAVERTON DR
City State Zip Code
MUNDELEIN IL 60060
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Finance Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.67
Date of Receipt M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8
Transaction ID: A2008-1152749
Amount of Each Receipt this Period 18.79

C. Full Name (Last, First, Middle Initial)
MICHAEL P MARK
Mailing Address 3178 HAVEN LANE
City State Zip Code
LINDENHURST IL 60046
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation CC IT Senior Planning Con
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 452.04
Date of Receipt M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8
Transaction ID: A2008-1153259
Amount of Each Receipt this Period 37.67

SUBTOTAL of Receipts This Page (optional) ► 75.25
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 124 / 242
(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 P MARK

Mailing Address 3178 HAVEN LANE

City State Zip Code
LINDENHURST IL 60046

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 489.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152822

Amount of Each Receipt this Period

37.67

B.

Full Name (Last, First, Middle Initial)
JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City State Zip Code
LAKE BLUFF IL 60044

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153282

Amount of Each Receipt this Period

19.88

C.

Full Name (Last, First, Middle Initial)
JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City State Zip Code
LAKE BLUFF IL 60044

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 258.44

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152846

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional) ▶

77.43

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 125 / 242
	<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) W. D Mays		Date of Receipt
	Mailing Address 256 Post Oak Drive		<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 06 / 06 / 2008
	City	State	Zip Code
	Roanoke	VA	24019
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153091
Name of Employer Allstate Insurance Company		Occupation Territory Manager	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"/> 220.99	<input type="text"/> 18.57

B.	Full Name (Last, First, Middle Initial) W. D Mays		Date of Receipt
	Mailing Address 256 Post Oak Drive		<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 06 / 20 / 2008
	City	State	Zip Code
	Roanoke	VA	24019
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152655
Name of Employer Allstate Insurance Company		Occupation Territory Manager	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"/> 239.56	<input type="text"/> 18.57

C.	Full Name (Last, First, Middle Initial) MARY J MC GINN		Date of Receipt
	Mailing Address 155 BUCKLEY 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 06 / 06 / 2008
	City	State	Zip Code
	BARRINGTON HILL	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153267
Name of Employer Allstate Insurance Company		Occupation Vice President & Deputy G	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"/> 921.34	<input type="text"/> 77.72

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 114.86
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 126 / 242
(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 Allstate Insurance Company Occupation Vice President & Deputy G

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 999.06

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152830

Amount of Each Receipt this Period
77.72

B.

Full Name (Last, First, Middle Initial)
JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
Hawthorn Woods 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 ▼ 477.12

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153212

Amount of Each Receipt this Period
39.76

C.

Full Name (Last, First, Middle Initial)
JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
Hawthorn Woods 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 ▼ 516.88

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152775

Amount of Each Receipt this Period
39.76

SUBTOTAL of Receipts This Page (optional) ► 157.24

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 127 / 242
	<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) BRIAN D MCCLELLAN		Date of Receipt
	Mailing Address 2206 W. LAWRENCE LANE		<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 06 / 20 / 2008
	City	State	Zip Code
	MT. PROSPECT	IL	60056
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152826
Name of Employer Allstate Insurance Company		Occupation Marketing 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 ▼ 203.74	<input type="text"/> 15.98

B.	Full Name (Last, First, Middle Initial) JOSEPH P MCCORMICK		Date of Receipt
	Mailing Address 808 PARKDALE CT.		<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 06 / 20 / 2008
	City	State	Zip Code
	SOUTHLAKE	TX	76092
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152642
Name of Employer Allstate Insurance Company		Occupation Senior Field Corporate Re	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 ▼ 211.30	<input type="text"/> 16.35

C.	Full Name (Last, First, Middle Initial) MARK A MCGILLIVRAY		Date of Receipt
	Mailing Address 1028 PORTSMOUTH CIRCLE		<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 06 / 06 / 2008
	City	State	Zip Code
	GURNEE	IL	60031
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153404
Name of Employer Allstate Insurance Company		Occupation AVP PCCSO	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 ▼ 262.93	<input type="text"/> 22.69

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 55.02
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 128 / 242
(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)
MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code
GURNEE IL 60031

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 ▼ 285.62

Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152967

Amount of Each Receipt this Period 22.69

B. Full Name (Last, First, Middle Initial)
EVA M MCINTEE

Mailing Address 28 MANCERA

City State Zip Code
RANCHO SANTA MA CA 92688

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 371.70

Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153398

Amount of Each Receipt this Period 31.60

C. Full Name (Last, First, Middle Initial)
EVA M MCINTEE

Mailing Address 28 MANCERA

City State Zip Code
RANCHO SANTA MA CA 92688

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.30

Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152961

Amount of Each Receipt this Period 31.60

SUBTOTAL of Receipts This Page (optional) 85.89

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 129 / 242
(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)
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: Allstate Insurance Company Occupation: Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 569.99

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153087
Amount of Each Receipt this Period: 24.98

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: Allstate Insurance Company Occupation: Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 594.97

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152651
Amount of Each Receipt this Period: 24.98

C. Full Name (Last, First, Middle Initial)
PATRICIA S MCPHERSON
Mailing Address 3133 N. Walker Lane West

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer: Allstate Insurance Company Occupation: Field Product Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.55

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152972
Amount of Each Receipt this Period: 16.35

SUBTOTAL of Receipts This Page (optional) ► 66.31

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: (check only one)	PAGE 130 / 242
	<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 J MCRAE		Date of Receipt MM / DD / YYYY 06 / 06 / 2008		
	Mailing Address 1213 THORNDALE LN		Transaction ID: A2008-1153123		
	City LAKE ZURICH	State IL	Zip Code 60047	Amount of Each Receipt this Period 22.55	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation Finance Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.25			

B.	Full Name (Last, First, Middle Initial) JEFFREY J MCRAE		Date of Receipt MM / DD / YYYY 06 / 20 / 2008		
	Mailing Address 1213 THORNDALE LN		Transaction ID: A2008-1152687		
	City LAKE ZURICH	State IL	Zip Code 60047	Amount of Each Receipt this Period 22.55	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation Finance Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 284.80			

C.	Full Name (Last, First, Middle Initial) GARY A MELLINI		Date of Receipt MM / DD / YYYY 06 / 06 / 2008		
	Mailing Address 21050 PRESTWICK DRIVE		Transaction ID: A2008-1153021		
	City BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 33.64	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 397.83			

SUBTOTAL of Receipts This Page (optional)	▶	78.74
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 131 / 242
(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)
GARY A MELLINI

Mailing Address 21050 PRESTWICK DRIVE

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 PCCSO Fiel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 431.47

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152587

Amount of Each Receipt this Period
33.64

B.

Full Name (Last, First, Middle Initial)
JANE M MELLON

Mailing Address 184 GARFIELD

City State Zip Code
ELMHURST IL 60126

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 ▼ 397.70

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 06 / 2008

Transaction ID: A2008-1153192

Amount of Each Receipt this Period
39.77

C.

Full Name (Last, First, Middle Initial)
JANE M MELLON

Mailing Address 184 GARFIELD

City State Zip Code
ELMHURST IL 60126

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 ▼ 437.47

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152755

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional) ► **113.18**

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: (check only one)	PAGE 132 / 242
	<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) HANS H METZINGER	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 407 E. CLAIRE LANE	Transaction ID: A2008-1152812
	City State Zip Code PROSPECT HTS IL 60070	Amount of Each Receipt this Period 16.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Distribution Support Lead Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 212.55	

B.	Full Name (Last, First, Middle Initial) JACK C MIGDAL	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 4240 FOREST GLEN DRIVE	Transaction ID: A2008-1152608
	City State Zip Code HOFFMAN ESTATES IL 60195	Amount of Each Receipt this Period 16.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claims Senior Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 212.55	

C.	Full Name (Last, First, Middle Initial) FREDERICK J MILLER	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 6975 MEADOW POINT TER	Transaction ID: A2008-1153141
	City State Zip Code NEW MARKET MD 21774	Amount of Each Receipt this Period 25.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Market Distribution Leade Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 302.70	

SUBTOTAL of Receipts This Page (optional)	58.40
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 133 / 242
(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 J MILLER

Mailing Address 6975 MEADOW POINT TER

City State Zip Code
NEW MARKET MD 21774

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 328.40

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152704

Amount of Each Receipt this Period
25.70

B.

Full Name (Last, First, Middle Initial)
STEVEN M MILLER

Mailing Address 1625 THORNEAPPLE LANE

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 257.79

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153310

Amount of Each Receipt this Period
21.92

C.

Full Name (Last, First, Middle Initial)
STEVEN M MILLER

Mailing Address 1625 THORNEAPPLE LANE

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 279.71

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152875

Amount of Each Receipt this Period
21.92

SUBTOTAL of Receipts This Page (optional) ▶ **69.54**

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 134 / 242
(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)
CHRISTINE K MINER

Mailing Address 25264 MCINTYRE SQUARE

City State Zip Code
SOUTH RIDING VA 20152

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 311.89

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153116

Amount of Each Receipt this Period
26.62

B. Full Name (Last, First, Middle Initial)
CHRISTINE K MINER

Mailing Address 25264 MCINTYRE SQUARE

City State Zip Code
SOUTH RIDING VA 20152

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152680

Amount of Each Receipt this Period
26.62

C. Full Name (Last, First, Middle Initial)
APRIL A MINKUS

Mailing Address 1132 GREENTREE ST.

City State Zip Code
DEERFIELD IL 60015

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.94

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152805

Amount of Each Receipt this Period
15.63

SUBTOTAL of Receipts This Page (optional) ► 68.87

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 135 / 242
(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) ALLISON L MOE		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
Mailing Address 215 Brampton Lane		Transaction ID: A2008-1152780
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.64
Name of Employer Allstate Insurance Company	Occupation Senior Field Operations M	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.87	

B.

Full Name (Last, First, Middle Initial) LAWRENCE P MOEWS		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
Mailing Address 740 W. JENNIFER CT.		Transaction ID: A2008-1153184
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.89
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 ▼ 603.28	

C.

Full Name (Last, First, Middle Initial) LAWRENCE P MOEWS		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
Mailing Address 740 W. JENNIFER CT.		Transaction ID: A2008-1152747
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.89
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 ▼ 654.17	

SUBTOTAL of Receipts This Page (optional)	118.42
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 136 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MARCIE E MOLEK	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 400 KEVIN LANE	Transaction ID: A2008-1153197
	City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 22.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: AVP Human Resource Ivanta Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 266.36	

B.	Full Name (Last, First, Middle Initial) MARCIE E MOLEK	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 400 KEVIN LANE	Transaction ID: A2008-1152760
	City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 22.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: AVP Human Resource Ivanta Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 289.09	

C.	Full Name (Last, First, Middle Initial) SHARON L MOLLER	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 19702 88TH AVE W	Transaction ID: A2008-1152971
	City State Zip Code EDMONDS WA 98026	Amount of Each Receipt this Period 16.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 212.55	

SUBTOTAL of Receipts This Page (optional)	61.81
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 137 / 242
(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)
EDWARD J MORAN
Mailing Address 131 ADELAIDE UNIT 406
City ELMHURST State IL Zip Code 60126
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153077
Amount of Each Receipt this Period: 50.34

Name of Employer: Allstate Insurance Company Occupation: AVP PCCSO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 595.53

B. Full Name (Last, First, Middle Initial)
EDWARD J MORAN
Mailing Address 131 ADELAIDE UNIT 406
City ELMHURST State IL Zip Code 60126
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152641
Amount of Each Receipt this Period: 50.34

Name of Employer: Allstate Insurance Company Occupation: AVP PCCSO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 645.87

C. Full Name (Last, First, Middle Initial)
KAREN S MORRIS
Mailing Address 27707 LA VISTA DRIVE
City MUNDELEIN State IL Zip Code 60060
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153285
Amount of Each Receipt this Period: 39.76

Name of Employer: Allstate Insurance Company Occupation: Home Office Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 513.12

SUBTOTAL of Receipts This Page (optional) ► 140.44
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 138 / 242
	<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 S MORRIS		Date of Receipt
	Mailing Address 27707 LA VISTA DRIVE		<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 06 / 20 / 2008
	City	State	Zip Code
	MUNDELEIN	IL	60060
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152849
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	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 ▼ 552.88	<input type="text"/> 39.76

B.	Full Name (Last, First, Middle Initial) LARRY E MOSER		Date of Receipt
	Mailing Address 611 W. BURNING TREE LANE		<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 06 / 06 / 2008
	City	State	Zip Code
	ARLINGTON HTS	IL	60004
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153191
Name of Employer Allstate Insurance Company		Occupation Sales Operations Manager	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 ▼ 340.20	<input type="text"/> 28.35

C.	Full Name (Last, First, Middle Initial) LARRY E MOSER		Date of Receipt
	Mailing Address 611 W. BURNING TREE LANE		<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 06 / 20 / 2008
	City	State	Zip Code
	ARLINGTON HTS	IL	60004
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152754
Name of Employer Allstate Insurance Company		Occupation Sales Operations Manager	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 ▼ 368.55	<input type="text"/> 28.35

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 96.46
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 139 / 242
(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)
MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.75

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153084
 Amount of Each Receipt this Period: 32.15

B.

Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 412.90

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152648
 Amount of Each Receipt this Period: 32.15

C.

Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.11

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153176
 Amount of Each Receipt this Period: 38.13

SUBTOTAL of Receipts This Page (optional) ► 102.43

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: PAGE 140 / 242
(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 F MULVIHILL

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 489.24

Date of Receipt 06 / 20 / 2008

Transaction ID: A2008-1152739

Amount of Each Receipt this Period 38.13

B.

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

Mailing Address 233 WOOD CREEK ROAD #305

City WHEELING State IL Zip Code 60090

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 477.19

Date of Receipt 06 / 06 / 2008

Transaction ID: A2008-1153366

Amount of Each Receipt this Period 39.77

C.

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

Mailing Address 233 WOOD CREEK ROAD #305

City WHEELING State IL Zip Code 60090

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 516.96

Date of Receipt 06 / 20 / 2008

Transaction ID: A2008-1152929

Amount of Each Receipt this Period 39.77

SUBTOTAL of Receipts This Page (optional) ► 117.67

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 141 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LINDA MYERS

Mailing Address 2333 CENTRAL ST #101

City EVANSTON State IL Zip Code 60201

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

Name of Employer Allstate Insurance Company Occupation Senior Tax Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 207.97

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152920
 Amount of Each Receipt this Period: 16.19

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

Mailing Address 2950 LAKE PLACID

City NORTHBROOK State IL Zip Code 60062

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 597.74

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153303
 Amount of Each Receipt this Period: 50.72

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

Mailing Address 2950 LAKE PLACID

City NORTHBROOK State IL Zip Code 60062

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 648.46

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152867
 Amount of Each Receipt this Period: 50.72

SUBTOTAL of Receipts This Page (optional) ► **117.63**

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 142 / 242
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
BRIAN J NAGEL

Mailing Address 1211 AIMTREE

City State Zip Code
SCHAUMBURG IL 60194

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.70

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153207

Amount of Each Receipt this Period
37.95

B.

Full Name (Last, First, Middle Initial)
BRIAN J NAGEL

Mailing Address 1211 AIMTREE

City State Zip Code
SCHAUMBURG IL 60194

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 489.65

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152770

Amount of Each Receipt this Period
37.95

C.

Full Name (Last, First, Middle Initial)
JOAN M NAUGHTON-GERDES

Mailing Address 650 MALIBOU

City State Zip Code
PALATINE IL 60074

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.78

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153283

Amount of Each Receipt this Period
19.64

SUBTOTAL of Receipts This Page (optional) ► 95.54

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 143 / 242
(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 NAUGHTON-GERDES

Mailing Address 650 MALIBOU

City State Zip Code
PALATINE IL 60074

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

Name of Employer Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 253.42

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152847

Amount of Each Receipt this Period

19.64

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 ▼ 1339.90

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153163

Amount of Each Receipt this Period

113.70

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 Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1453.60

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152726

Amount of Each Receipt this Period

113.70

SUBTOTAL of Receipts This Page (optional) ▶

247.04

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 144 / 242
(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)
PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 282.30

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153367

Amount of Each Receipt this Period
24.00

B.

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

Mailing Address 22451 THORNBURY CT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 306.30

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152930

Amount of Each Receipt this Period
24.00

C.

Full Name (Last, First, Middle Initial)
THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City State Zip Code
WAUKEGAN IL 60085

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

Name of Employer Allstate Insurance Company Occupation Human Resource Senior Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 358.74

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153298

Amount of Each Receipt this Period
30.32

SUBTOTAL of Receipts This Page (optional) ► 78.32

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 145 / 242
(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 R NORTON

Mailing Address 1423 PIONEER COURT

City State Zip Code
WAUKEGAN IL 60085

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

Name of Employer Allstate Insurance Company Occupation Human Resource Senior Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 389.06

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152862

Amount of Each Receipt this Period
30.32

B. Full Name (Last, First, Middle Initial)
RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.79

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153154

Amount of Each Receipt this Period
19.17

C. Full Name (Last, First, Middle Initial)
RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.96

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152717

Amount of Each Receipt this Period
19.17

SUBTOTAL of Receipts This Page (optional) ► 68.66

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 146 / 242
(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 O'MALLEY

Mailing Address 1816 ASPEN LANE

City State Zip Code
MOUNT PROSPECT IL 60056

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

Name of Employer Occupation
Allstate Insurance Company Human Resource Senior Man

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.55

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152840

Amount of Each Receipt this Period

16.35

B.

Full Name (Last, First, Middle Initial)
MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
NAPERVILLE IL 60565

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

Name of Employer Occupation
Allstate Insurance Company Agency Consulting Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 342.13

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153041

Amount of Each Receipt this Period

29.09

C.

Full Name (Last, First, Middle Initial)
MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
NAPERVILLE IL 60565

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

Name of Employer Occupation
Allstate Insurance Company Agency Consulting Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 371.22

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152607

Amount of Each Receipt this Period

29.09

SUBTOTAL of Receipts This Page (optional) ▶

74.53

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 147 / 242
	<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) ROGER D ODLE, II	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 5170 BARCROFT DRIVE	Transaction ID: A2008-1153273
	City State Zip Code HOFFMAN ESTATES IL 60010	Amount of Each Receipt this Period 38.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior State Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.68

B.	Full Name (Last, First, Middle Initial) ROGER D ODLE, II	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 5170 BARCROFT DRIVE	Transaction ID: A2008-1152837
	City State Zip Code HOFFMAN ESTATES IL 60010	Amount of Each Receipt this Period 38.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior State Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.57

C.	Full Name (Last, First, Middle Initial) KATHY A OLCESE	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 35 YORK ST	Transaction ID: A2008-1153143
	City State Zip Code HUDSON OH 44236	Amount of Each Receipt this Period 24.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Risk Management Busin Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.89

SUBTOTAL of Receipts This Page (optional)	102.15
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 148 / 242
	<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) KATHY A OLCESE	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 35 YORK ST	Transaction ID: A2008-1152706
	City HUDSON State OH Zip Code 44236	Amount of Each Receipt this Period 24.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Risk Management Busin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.26	

B.	Full Name (Last, First, Middle Initial) CRAIG A OLDHAM	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 2606 N Paulina ST	Transaction ID: A2008-1153340
	City CHICAGO State IL Zip Code 60614	Amount of Each Receipt this Period 35.04
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Marketing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.38	

C.	Full Name (Last, First, Middle Initial) CRAIG A OLDHAM	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2606 N Paulina ST	Transaction ID: A2008-1152905
	City CHICAGO State IL Zip Code 60614	Amount of Each Receipt this Period 35.04
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Marketing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.42	

SUBTOTAL of Receipts This Page (optional)	94.45
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 149 / 242
(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)
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 Allstate Insurance Company Occupation Vice President Procurement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 728.88

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153356

Amount of Each Receipt this Period
67.20

B.

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 Allstate Insurance Company Occupation Vice President Procurement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 796.08

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152921

Amount of Each Receipt this Period
67.20

C.

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

Mailing Address 9352 ANSLEY LANE

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Allstate Insurance Company Occupation Claims Field Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 449.52

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153122

Amount of Each Receipt this Period
45.09

SUBTOTAL of Receipts This Page (optional) ► **179.49**

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 150 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) PAMELA J OVERTON		Date of Receipt
	Mailing Address 9352 ANSLEY LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	BRENTWOOD	TN	37027
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Allstate Insurance Company		Occupation Claims Field Director	Transaction ID: A2008-1152686
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 490.85	<input type="text"/> 41.33

B.	Full Name (Last, First, Middle Initial) ALAN D PAGE		Date of Receipt
	Mailing Address 13530 LUCKY LAKE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Allstate Insurance Company		Occupation VP-Agency Distribution	Transaction ID: A2008-1153420
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 445.86	<input type="text"/> 37.73

C.	Full Name (Last, First, Middle Initial) ALAN D PAGE		Date of Receipt
	Mailing Address 13530 LUCKY LAKE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Allstate Insurance Company		Occupation VP-Agency Distribution	Transaction ID: A2008-1152983
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 483.59	<input type="text"/> 37.73

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 116.79
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 151 / 242
	<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) DEAN T PAPPAS	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 3406 VICEROY COURT	Transaction ID: A2008-1153079
	City State Zip Code EDGEWATER MD 21037	Amount of Each Receipt this Period 39.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 518.59	

B.	Full Name (Last, First, Middle Initial) DEAN T PAPPAS	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 3406 VICEROY COURT	Transaction ID: A2008-1152643
	City State Zip Code EDGEWATER MD 21037	Amount of Each Receipt this Period 39.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 558.36	

C.	Full Name (Last, First, Middle Initial) ROBERT L PARK	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1107 BONITA DRIVE	Transaction ID: A2008-1153274
	City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 53.82
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Public Relations Mana Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 639.29	

SUBTOTAL of Receipts This Page (optional)	▶	133.36
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 152 / 242
(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 ▼ 693.11

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152838

Amount of Each Receipt this Period
53.82

B.

Full Name (Last, First, Middle Initial)
ROGER D PARKER

Mailing Address 1305 N MAIDSTONE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Occupation
Allstate Insurance Company AVP Corporate Marketing

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 586.73

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153417

Amount of Each Receipt this Period
49.69

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 ▼ 636.42

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152980

Amount of Each Receipt this Period
49.69

SUBTOTAL of Receipts This Page (optional)

153.20

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 153 / 242
(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)
MAYUR M PATEL

Mailing Address 742 E PARKVIEW CT

City ROSELLE State IL Zip Code 60172

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.33

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153209

Amount of Each Receipt this Period 31.24

B.

Full Name (Last, First, Middle Initial)
MAYUR M PATEL

Mailing Address 742 E PARKVIEW CT

City ROSELLE State IL Zip Code 60172

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.57

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152772

Amount of Each Receipt this Period 31.24

C.

Full Name (Last, First, Middle Initial)
CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 878.50

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153066

Amount of Each Receipt this Period 74.40

SUBTOTAL of Receipts This Page (optional) ► 136.88

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 154 / 242
	<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) CHARLES PAUL	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 301 CAMELOT LANE	Transaction ID: A2008-1152631
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 74.40
	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 ▼ 952.90	

B.	Full Name (Last, First, Middle Initial) RONALD J PEPPING	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 934 LEWIS PLACE	Transaction ID: A2008-1153250
	City State Zip Code GENEVA IL 60134	Amount of Each Receipt this Period 30.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Ivantage Financial Manage Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 358.97	

C.	Full Name (Last, First, Middle Initial) RONALD J PEPPING	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 934 LEWIS PLACE	Transaction ID: A2008-1152813
	City State Zip Code GENEVA IL 60134	Amount of Each Receipt this Period 30.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Ivantage Financial Manage Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 389.13	

SUBTOTAL of Receipts This Page (optional)	134.72
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 155 / 242
	(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) FLORIE S PERELLIS	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1480 MINTHAVEN RD	Transaction ID: A2008-1153032
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 49.56
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel & Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 584.07	

B.	Full Name (Last, First, Middle Initial) FLORIE S PERELLIS	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1480 MINTHAVEN RD	Transaction ID: A2008-1152598
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 49.56
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel & Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 633.63	

C.	Full Name (Last, First, Middle Initial) NANCY A PERRY	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 3575 CALDERWOOD DR	Transaction ID: A2008-1153272
	City State Zip Code ROCKFORD IL 61114	Amount of Each Receipt this Period 18.40
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Human Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 216.00	

SUBTOTAL of Receipts This Page (optional)	117.52
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 156 / 242
(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)
NANCY A PERRY

Mailing Address 3575 CALDERWOOD DR

City State Zip Code
ROCKFORD IL 61114

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

Name of Employer Allstate Insurance Company Occupation Human Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.40

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152835

Amount of Each Receipt this Period
18.40

B. Full Name (Last, First, Middle Initial)
Thomas Peterson

Mailing Address 2756 Breckenridge Lane

City State Zip Code
Naperville IL 60565

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 364.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153432

Amount of Each Receipt this Period
30.60

C. Full Name (Last, First, Middle Initial)
Thomas Peterson

Mailing Address 2756 Breckenridge Lane

City State Zip Code
Naperville IL 60565

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 394.80

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152996

Amount of Each Receipt this Period
30.60

SUBTOTAL of Receipts This Page (optional) ▶ 79.60

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 157 / 242
(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)
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 ▼ 596.37

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153031

Amount of Each Receipt this Period
50.31

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 ▼ 646.68

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152597

Amount of Each Receipt this Period
50.31

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 ▼ 813.75

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153162

Amount of Each Receipt this Period
69.45

SUBTOTAL of Receipts This Page (optional) ► **170.07**

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 158 / 242 (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

<p>A. Full Name (Last, First, Middle Initial) JOHN C PINTOZZI</p> <p>Mailing Address 2116 W CHURCHILL ST</p> <p>City State Zip Code CHICAGO IL 60647</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Vice President Finance -</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 883.20</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152725</p> <p>Amount of Each Receipt this Period 69.45</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) DAVID J PRENDERGAST</p> <p>Mailing Address 2816 HAVEN LANE</p> <p>City State Zip Code LINDENHURST IL 60046</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Regional Distribution Lea</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 483.50</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153024</p> <p>Amount of Each Receipt this Period 40.90</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) DAVID J PRENDERGAST</p> <p>Mailing Address 2816 HAVEN LANE</p> <p>City State Zip Code LINDENHURST IL 60046</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Regional Distribution Lea</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 524.40</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152590</p> <p>Amount of Each Receipt this Period 40.90</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>151.25</p>
<p>TOTAL This Period (last page this line number only)</p>	<p> </p>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 159 / 242
(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 G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.60

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153300

Amount of Each Receipt this Period
21.80

B.

Full Name (Last, First, Middle Initial)
THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 282.40

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152864

Amount of Each Receipt this Period
21.80

C.

Full Name (Last, First, Middle Initial)
JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City State Zip Code
ARLINGTON HGTS IL 60005

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

Name of Employer Allstate Insurance Company Occupation Senior Product Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 362.76

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153426

Amount of Each Receipt this Period
30.78

SUBTOTAL of Receipts This Page (optional) ► **74.38**

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

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

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

FOR LINE NUMBER: PAGE 160 / 242
(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)
JORGE A QUEZADA
Mailing Address 1407 W. GROVE ST
City ARLINGTON HGTS State IL Zip Code 60005
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior Product Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date 393.54
Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152989
Amount of Each Receipt this Period 30.78

B. Full Name (Last, First, Middle Initial)
JOSEPH P RATH
Mailing Address 359 STAFFORD COURT
City LAKE FOREST State IL Zip Code 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 687.76
Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153132
Amount of Each Receipt this Period 58.13

C. Full Name (Last, First, Middle Initial)
JOSEPH P RATH
Mailing Address 359 STAFFORD COURT
City LAKE FOREST State IL Zip Code 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 745.89
Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152695
Amount of Each Receipt this Period 58.13

SUBTOTAL of Receipts This Page (optional) ► 147.04
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 161 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JOHN B REARDON		Date of Receipt
	Mailing Address 441 KELLY LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City	State	Zip Code
	CRYSTAL LAKE	IL	60012
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153009
Name of Employer Allstate Insurance Company		Occupation Claims Senior Manager	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"/> 508.95	<input type="text"/> 43.60

B.	Full Name (Last, First, Middle Initial) JOHN B REARDON		Date of Receipt
	Mailing Address 441 KELLY LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	CRYSTAL LAKE	IL	60012
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152576
Name of Employer Allstate Insurance Company		Occupation Claims Senior Manager	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"/> 552.55	<input type="text"/> 43.60

C.	Full Name (Last, First, Middle Initial) KEVIN P RICE		Date of Receipt
	Mailing Address 703 ETON COURT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City	State	Zip Code
	LIBERTYVILLE	IL	60048
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153220
Name of Employer Allstate Insurance Company		Occupation CC IT Senior Planning Con	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"/> 427.21	<input type="text"/> 36.18

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 123.38
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 / 242
	<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 P RICE		Date of Receipt
	Mailing Address 703 ETON 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 06 / 20 / 2008
	City	State	Zip Code
	LIBERTYVILLE	IL	60048
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152783
Name of Employer Allstate Insurance Company		Occupation CC IT Senior Planning Con	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 ▼ 463.39	<input type="text"/> 36.18

B.	Full Name (Last, First, Middle Initial) BRIAN R RICHARD		Date of Receipt
	Mailing Address 37 JOSEPH PLACE		<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 06 / 06 / 2008
	City	State	Zip Code
	WAYNE	NJ	07470
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153001
Name of Employer Allstate Insurance Company		Occupation Market Distribution Leade	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 ▼ 296.40	<input type="text"/> 25.10

C.	Full Name (Last, First, Middle Initial) BRIAN R RICHARD		Date of Receipt
	Mailing Address 37 JOSEPH PLACE		<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 06 / 20 / 2008
	City	State	Zip Code
	WAYNE	NJ	07470
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152568
Name of Employer Allstate Insurance Company		Occupation Market Distribution Leade	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 ▼ 321.50	<input type="text"/> 25.10

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 86.38
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 163 / 242
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. 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 ▼ 852.60

Date of Receipt: MM / DD / YYYY
06 / 06 / 2008
Transaction ID: A2008-1153069
Amount of Each Receipt this Period: 72.35

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 ▼ 924.95

Date of Receipt: MM / DD / YYYY
06 / 20 / 2008
Transaction ID: A2008-1152634
Amount of Each Receipt this Period: 72.35

C. Full Name (Last, First, Middle Initial)
ROBIN R RICHMOND
Mailing Address 9 HAWTHORN GROVE CIRCLE

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 Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 311.87

Date of Receipt: MM / DD / YYYY
06 / 06 / 2008
Transaction ID: A2008-1153294
Amount of Each Receipt this Period: 26.31

SUBTOTAL of Receipts This Page (optional) ► 171.01

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 164 / 242
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
ROBIN R RICHMOND

Mailing Address 9 HAWTHORN GROVE CIRCLE

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 Technology Shared Ser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.18

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152858

Amount of Each Receipt this Period
26.31

B.

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

Mailing Address 7 ONEIDA LANE

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 Homeowner Initiative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 619.86

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153073

Amount of Each Receipt this Period
92.53

C.

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 ▼ 1005.57

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153362

Amount of Each Receipt this Period
85.96

SUBTOTAL of Receipts This Page (optional) ► 204.80

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:	PAGE 165 / 242
	(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) DANIEL J RIVERA		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1632 OLD BARN CIRCLE		Transaction ID: A2008-1152925
	City LIBERTYVILLE	State IL	Zip Code 60048
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.96
	Name of Employer Allstate Insurance Company	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1091.53	

B.	Full Name (Last, First, Middle Initial) MARIO RIZZO		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 5926 W. 90TH PLACE		Transaction ID: A2008-1153224
	City OAK LAWN	State IL	Zip Code 60453
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.55
	Name of Employer Allstate Insurance Company	Occupation AVP Property & Casualty F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 513.90	

C.	Full Name (Last, First, Middle Initial) MARIO RIZZO		Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 5926 W. 90TH PLACE		Transaction ID: A2008-1152787
	City OAK LAWN	State IL	Zip Code 60453
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.55
	Name of Employer Allstate Insurance Company	Occupation AVP Property & Casualty F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 558.45	

SUBTOTAL of Receipts This Page (optional)	175.06
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 166 / 242
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
CLAY F ROBERTS

Mailing Address 3075 Sanders Road Suite G2E

City Northbrook State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 421.57

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	8

Transaction ID: A2008-1153418

Amount of Each Receipt this Period 35.56

B.

Full Name (Last, First, Middle Initial)
CLAY F ROBERTS

Mailing Address 3075 Sanders Road Suite G2E

City Northbrook State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 457.13

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: A2008-1152981

Amount of Each Receipt this Period 35.56

C.

Full Name (Last, First, Middle Initial)
DANIEL P ROBERTS

Mailing Address 4374 W Anderson Rd

City South Euclid State OH Zip Code 44121

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 267.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	8

Transaction ID: A2008-1153063

Amount of Each Receipt this Period 22.81

SUBTOTAL of Receipts This Page (optional) ► 93.93

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 / 242		
	<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

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 4374 W Anderson Rd

City State Zip Code
South Euclid OH 44121

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.04

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152628

Amount of Each Receipt this Period
22.81

B. Full Name (Last, First, Middle Initial)
TED ROBERTS

Mailing Address 811 SANDY TRAIL

City State Zip Code
KELLER TX 76248

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

Name of Employer Allstate Insurance Company Occupation Financial Services Consul

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.34

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153381

Amount of Each Receipt this Period
29.72

C. Full Name (Last, First, Middle Initial)
TED ROBERTS

Mailing Address 811 SANDY TRAIL

City State Zip Code
KELLER TX 76248

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

Name of Employer Allstate Insurance Company Occupation Financial Services Consul

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 382.06

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152944

Amount of Each Receipt this Period
29.72

SUBTOTAL of Receipts This Page (optional) ► **82.25**

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 168 / 242

(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 J ROCHE

Mailing Address 270 KINGSWAY DRIVE

City State Zip Code
AURORA IL 60506

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

Name of Employer Occupation
Allstate Insurance Company SVP-PROTECTION TECH & ADM

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1153.36

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153239

Amount of Each Receipt this Period

97.68

B.

Full Name (Last, First, Middle Initial)
MICHAEL J ROCHE

Mailing Address 270 KINGSWAY DRIVE

City State Zip Code
AURORA IL 60506

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

Name of Employer Occupation
Allstate Insurance Company SVP-PROTECTION TECH & ADM

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1251.04

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152802

Amount of Each Receipt this Period

97.68

C.

Full Name (Last, First, Middle Initial)
GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City State Zip Code
RIVER FOREST IL 60305

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 537.24

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153157

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional) ▶

235.13

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 169 / 242
(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

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)

GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City State Zip Code
RIVER FOREST IL 60305

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 577.01

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152720

Amount of Each Receipt this Period

39.77

B.

Full Name (Last, First, Middle Initial)

DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City State Zip Code
HINSDALE IL 60521

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

Name of Employer Occupation
Allstate Insurance Company Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 383.86

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153233

Amount of Each Receipt this Period

32.40

C.

Full Name (Last, First, Middle Initial)

DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City State Zip Code
HINSDALE IL 60521

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

Name of Employer Occupation
Allstate Insurance Company Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 416.26

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152796

Amount of Each Receipt this Period

32.40

SUBTOTAL of Receipts This Page (optional)

104.57

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: PAGE 170 / 242
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

<p>A. Full Name (Last, First, Middle Initial) GEORGE E RUEBENSON</p> <p>Mailing Address 29 FOX TR</p> <p>City State Zip Code LINCOLNSHIRE IL 60069</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation SVP-P-CCSO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1730.76</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153290</p> <p>Amount of Each Receipt this Period 144.23</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) GEORGE E RUEBENSON</p> <p>Mailing Address 29 FOX TR</p> <p>City State Zip Code LINCOLNSHIRE IL 60069</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation SVP-P-CCSO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1874.99</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152854</p> <p>Amount of Each Receipt this Period 144.23</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) DOREEN M RYAN</p> <p>Mailing Address 17 ALSTON COURT</p> <p>City State Zip Code RED BANK NJ 07701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Managing Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 261.60</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153058</p> <p>Amount of Each Receipt this Period 21.80</p>
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SUBTOTAL of Receipts This Page (optional)	310.26
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 171 / 242
(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

<p>A. Full Name (Last, First, Middle Initial) DOREEN M RYAN</p> <p>Mailing Address 17 ALSTON COURT</p> <p>City State Zip Code RED BANK NJ 07701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Managing Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 283.40</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152623</p> <p>Amount of Each Receipt this Period 21.80</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) PAUL R RYSKE</p> <p>Mailing Address 898 E. LONGWOOD DR.</p> <p>City State Zip Code LAKE FOREST IL 60045</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Home Office Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 282.06</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153155</p> <p>Amount of Each Receipt this Period 19.88</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) PAUL R RYSKE</p> <p>Mailing Address 898 E. LONGWOOD DR.</p> <p>City State Zip Code LAKE FOREST IL 60045</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Home Office Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 301.94</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152718</p> <p>Amount of Each Receipt this Period 19.88</p>
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SUBTOTAL of Receipts This Page (optional)	61.56
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 172 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MICHAEL A SCARDINA	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 51 SOUTH ROYAL OAK	Transaction ID: A2008-1153134
	City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 28.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Asset Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.07	

B.	Full Name (Last, First, Middle Initial) MICHAEL A SCARDINA	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 51 SOUTH ROYAL OAK	Transaction ID: A2008-1152697
	City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 28.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Asset Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 343.92	

C.	Full Name (Last, First, Middle Initial) PATRICK J SCHNEIDER	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 210 NORTH TRAIL	Transaction ID: A2008-1153277
	City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 29.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 352.31	

SUBTOTAL of Receipts This Page (optional)	▶	87.48
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: (check only one)	PAGE 173 / 242
	<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)
PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 382.09

Date of Receipt: MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152841

Amount of Each Receipt this Period: 29.78

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 ▼ 622.08

Date of Receipt: MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153060

Amount of Each Receipt this Period: 52.89

C. 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 ▼ 674.97

Date of Receipt: MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152625

Amount of Each Receipt this Period: 52.89

SUBTOTAL of Receipts This Page (optional) ► 135.56

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 174 / 242
	<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) DALE J SCHUELLER		Date of Receipt
	Mailing Address 2941 GLENARYE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City	State	Zip Code
	LINDENHURST	IL	60046
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153371
Name of Employer Allstate Insurance Company		Occupation Field Administration Dire	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"/> 18.33
		<input type="text"/> 202.31	

B.	Full Name (Last, First, Middle Initial) DALE J SCHUELLER		Date of Receipt
	Mailing Address 2941 GLENARYE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City	State	Zip Code
	LINDENHURST	IL	60046
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152934
Name of Employer Allstate Insurance Company		Occupation Field Administration Dire	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"/> 18.33
		<input type="text"/> 220.64	

C.	Full Name (Last, First, Middle Initial) DAVID I SCHUR		Date of Receipt
	Mailing Address 1216 SANDHURST DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City	State	Zip Code
	BUFFALO GROVE	IL	60089
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153203
Name of Employer Allstate Insurance Company		Occupation Controller	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"/> 24.13
		<input type="text"/> 283.81	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 60.79
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 175 / 242
(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)
DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City State Zip Code
BUFFALO GROVE IL 60089

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

Name of Employer Allstate Insurance Company Occupation Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 307.94

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152766

Amount of Each Receipt this Period
24.13

B. Full Name (Last, First, Middle Initial)
MICHAEL D SCHUSTER

Mailing Address 526 LANGE COURT

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼ 220.38

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153405

Amount of Each Receipt this Period
18.59

C. Full Name (Last, First, Middle Initial)
MICHAEL D SCHUSTER

Mailing Address 526 LANGE COURT

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼ 238.97

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152968

Amount of Each Receipt this Period
18.59

SUBTOTAL of Receipts This Page (optional) ► **61.31**

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: (check only one)	PAGE 176 / 242
	<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) DAVID J SCHWARTZER	Date of Receipt
	Mailing Address 1911 205TH PL NE	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 06 / 2008
	City State Zip Code SAMMAMISH WA 98074	Transaction ID: A2008-1153331
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 47.08
	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 ▼ <input type="text"/> 560.31	

B.	Full Name (Last, First, Middle Initial) DAVID J SCHWARTZER	Date of Receipt
	Mailing Address 1911 205TH PL NE	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City State Zip Code SAMMAMISH WA 98074	Transaction ID: A2008-1152896
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 47.08
	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 ▼ <input type="text"/> 607.39	

C.	Full Name (Last, First, Middle Initial) ALBERT SCHWARZHAUPT	Date of Receipt
	Mailing Address 29 Doral Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 20 / 2008
	City State Zip Code Hawthorn Woods IL 60047	Transaction ID: A2008-1152605
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 16.35
	Name of Employer Allstate Insurance Company Occupation Senior Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 212.55	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 110.51
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 177 / 242
(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)
DANNY R SELLERS

Mailing Address 5903 87TH ST

City State Zip Code
LUBBOCK TX 79424

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt: MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153359

Amount of Each Receipt this Period: 24.10

B. Full Name (Last, First, Middle Initial)
STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
Chicago IL 60611

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

Name of Employer Allstate Insurance Company Occupation Communication Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.26

Date of Receipt: MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153266

Amount of Each Receipt this Period: 38.10

C. Full Name (Last, First, Middle Initial)
STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
Chicago IL 60611

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

Name of Employer Allstate Insurance Company Occupation Communication Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.64

Date of Receipt: MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152829

Amount of Each Receipt this Period: 40.38

SUBTOTAL of Receipts This Page (optional) ► 102.58

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 178 / 242
(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)
STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60187

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

Name of Employer Occupation
Allstate Insurance Company Vice President Property/C

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 966.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153232

Amount of Each Receipt this Period
81.89

B.

Full Name (Last, First, Middle Initial)
STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60187

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

Name of Employer Occupation
Allstate Insurance Company Vice President Property/C

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1048.82

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152795

Amount of Each Receipt this Period
81.89

C.

Full Name (Last, First, Middle Initial)
STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 256.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153150

Amount of Each Receipt this Period
19.88

SUBTOTAL of Receipts This Page (optional)

183.66

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 179 / 242
	<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 R SHEFFEY		Date of Receipt
	Mailing Address 839 SUMAC		<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
	HIGHLAND PARK	IL	60035
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152713
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	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"/> 19.88
		<input type="text"/> 276.44	

B.	Full Name (Last, First, Middle Initial) DENIS C SHUNTA		Date of Receipt
	Mailing Address 5200 RIDGEGATE 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
	FAIR OAKS	CA	95628
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1153313
Name of Employer Allstate Insurance Company		Occupation Field Product Manager	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"/> 21.80
		<input type="text"/> 261.60	

C.	Full Name (Last, First, Middle Initial) DENIS C SHUNTA		Date of Receipt
	Mailing Address 5200 RIDGEGATE 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
	FAIR OAKS	CA	95628
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-1152878
Name of Employer Allstate Insurance Company		Occupation Field Product Manager	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"/> 21.80
		<input type="text"/> 283.40	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 63.48
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 180 / 242
	<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 SIMMONS	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 418 DEUCE DRIVE	Transaction ID: A2008-1153051
	City WALL State NJ Zip Code 07719	Amount of Each Receipt this Period 29.43
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 348.86	

B.	Full Name (Last, First, Middle Initial) ROBERT L SIMMONS	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 418 DEUCE DRIVE	Transaction ID: A2008-1152616
	City WALL State NJ Zip Code 07719	Amount of Each Receipt this Period 29.43
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 378.29	

C.	Full Name (Last, First, Middle Initial) KIMBALL S SIMON	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 11 WEHRHEIM	Transaction ID: A2008-1153387
	City BARRINGTON State IL Zip Code 60010	Amount of Each Receipt this Period 37.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation CC IT Systems Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 441.32	

SUBTOTAL of Receipts This Page (optional)	96.02
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 181 / 242
(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)
KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 478.48

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152950
Amount of Each Receipt this Period: 37.16

B. Full Name (Last, First, Middle Initial)
ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Allstate Insurance Company Occupation Tax Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 318.12

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153160
Amount of Each Receipt this Period: 26.51

C. Full Name (Last, First, Middle Initial)
ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Allstate Insurance Company Occupation Tax Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 344.63

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152723
Amount of Each Receipt this Period: 26.51

SUBTOTAL of Receipts This Page (optional) ► 90.18

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: (check only one)	PAGE 182 / 242
	<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) JOHN G SINICKI	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 2117 CARROLL CREEK VIEW CT	Transaction ID: A2008-1153117
	City State Zip Code FREDERICK MD 21702	Amount of Each Receipt this Period 20.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.33

B.	Full Name (Last, First, Middle Initial) JOHN G SINICKI	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2117 CARROLL CREEK VIEW CT	Transaction ID: A2008-1152681
	City State Zip Code FREDERICK MD 21702	Amount of Each Receipt this Period 20.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.27

C.	Full Name (Last, First, Middle Initial) KEVIN R SLAWIN	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1316 CRESTWOOD DRIVE	Transaction ID: A2008-1153275
	City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 41.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP AF Admin Serv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 488.00

SUBTOTAL of Receipts This Page (optional)	▶	82.88
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 183 / 242
	<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		Date of Receipt
	Mailing Address 1316 CRESTWOOD DRIVE		<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
	NORTHBROOK	IL	60062
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152839
Name of Employer Allstate Insurance Company		Occupation VP AF Admin Serv	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"/> 41.00
		<input type="text"/> 529.00	

B.	Full Name (Last, First, Middle Initial) KIMBERLY J SLOANE		Date of Receipt
	Mailing Address 378 N. VISTA AVE		<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
	LOMBARD	IL	60148
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153255
Name of Employer Allstate Insurance Company		Occupation Claim Reserve 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 ▼	<input type="text"/> 39.77
		<input type="text"/> 470.14	

C.	Full Name (Last, First, Middle Initial) KIMBERLY J SLOANE		Date of Receipt
	Mailing Address 378 N. VISTA AVE		<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
	LOMBARD	IL	60148
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152818
Name of Employer Allstate Insurance Company		Occupation Claim Reserve 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 ▼	<input type="text"/> 39.77
		<input type="text"/> 509.91	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 120.54
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 184 / 242
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BENJAMIN M SMITH

Mailing Address 1008 CHESAPEAK BLVD

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.19

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152666

Amount of Each Receipt this Period
16.68

B. Full Name (Last, First, Middle Initial)
CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.48

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153336

Amount of Each Receipt this Period
33.04

C. Full Name (Last, First, Middle Initial)
CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 418.52

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152901

Amount of Each Receipt this Period
33.04

SUBTOTAL of Receipts This Page (optional) ► 82.76

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: PAGE 185 / 242
(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)
ELIAS SMITH

Mailing Address 2751 SW BEAR PAW TRAIL

City State Zip Code
PALM CITY FL 34990

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 273.23

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153056

Amount of Each Receipt this Period
23.14

B.

Full Name (Last, First, Middle Initial)
ELIAS SMITH

Mailing Address 2751 SW BEAR PAW TRAIL

City State Zip Code
PALM CITY FL 34990

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 296.37

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152621

Amount of Each Receipt this Period
23.14

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 ▼ 721.57

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153235

Amount of Each Receipt this Period
61.11

SUBTOTAL of Receipts This Page (optional) ► **107.39**

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 186 / 242
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
J 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 Occupation
Allstate Insurance Company VP Distribution and Chann

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 782.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152798

Amount of Each Receipt this Period

61.11

B.

Full Name (Last, First, Middle Initial)
KENNETH D SMITH

Mailing Address 619 N HUMPHREY AVE.

City State Zip Code
OAK PARK IL 60302

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

Name of Employer Occupation
Allstate Insurance Company CC IT Senior Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 202.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152833

Amount of Each Receipt this Period

15.80

C.

Full Name (Last, First, Middle Initial)
RANDALL D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City State Zip Code
Scottsdale AZ 85262

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

Name of Employer Occupation
Allstate Insurance Company Controller

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153376

Amount of Each Receipt this Period

29.90

SUBTOTAL of Receipts This Page (optional)

106.81

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 187 / 242
(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)
RANDALL D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City State Zip Code
Scottsdale AZ 85262

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

Name of Employer Allstate Insurance Company Occupation Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.20

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152939

Amount of Each Receipt this Period
29.90

B. Full Name (Last, First, Middle Initial)
STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 922.99

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153322

Amount of Each Receipt this Period
78.17

C. Full Name (Last, First, Middle Initial)
STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.16

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152887

Amount of Each Receipt this Period
78.17

SUBTOTAL of Receipts This Page (optional) ► **186.24**

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 188 / 242
	<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 A SPATARO	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1663 SARATOGA LANE	Transaction ID: A2008-1153296
	City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 31.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Account Research Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 376.89	

B.	Full Name (Last, First, Middle Initial) KEVIN A SPATARO	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1663 SARATOGA LANE	Transaction ID: A2008-1152860
	City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 31.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Account Research Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 408.81	

C.	Full Name (Last, First, Middle Initial) EDWIN M SPECHT	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 740 AMBRIA DRIVE	Transaction ID: A2008-1153076
	City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 36.26
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Human Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 426.47	

SUBTOTAL of Receipts This Page (optional)	▶	100.10
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: (check only one)	PAGE 189 / 242
	<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) EDWIN M SPECHT	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 740 AMBRIA DRIVE	Transaction ID: A2008-1152640
	City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 36.26
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Human Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.73

B.	Full Name (Last, First, Middle Initial) JAMES G SPORLEDER	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 20 LAKESIDE LANE	Transaction ID: A2008-1153289
	City State Zip Code N. BARRINGTON IL 60010	Amount of Each Receipt this Period 27.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel & Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.54

C.	Full Name (Last, First, Middle Initial) JAMES G SPORLEDER	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 20 LAKESIDE LANE	Transaction ID: A2008-1152853
	City State Zip Code N. BARRINGTON IL 60010	Amount of Each Receipt this Period 27.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel & Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 354.06

SUBTOTAL of Receipts This Page (optional)	91.30
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 190 / 242
(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 ▼ 515.69

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153137

Amount of Each Receipt this Period
44.37

B. Full Name (Last, First, Middle Initial)
MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.06

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152700

Amount of Each Receipt this Period
44.37

C. Full Name (Last, First, Middle Initial)
STACEY A SPRUNG

Mailing Address 106 E. WHISTLERS BEND CIR.

City State Zip Code
THE WOODLANDS TX 77384

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

Name of Employer Allstate Insurance Company Occupation Lead Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.23

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153011

Amount of Each Receipt this Period
21.19

SUBTOTAL of Receipts This Page (optional) ► **109.93**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 191 / 242
(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)
STACEY A SPRUNG

Mailing Address 106 E. WHISTLERS BEND CIR.

City State Zip Code
THE WOODLANDS TX 77384

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

Name of Employer Allstate Insurance Company Occupation Lead Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.42

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152578

Amount of Each Receipt this Period
21.19

B.

Full Name (Last, First, Middle Initial)
EMORY D STEPHENS, jr

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

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

Name of Employer Allstate Insurance Company Occupation AVP Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 472.88

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153101

Amount of Each Receipt this Period
39.89

C.

Full Name (Last, First, Middle Initial)
EMORY D STEPHENS, jr

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

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

Name of Employer Allstate Insurance Company Occupation AVP Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 512.77

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152665

Amount of Each Receipt this Period
39.89

SUBTOTAL of Receipts This Page (optional) ► 100.97

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: (check only one)	PAGE 192 / 242
	<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) GARY S STERE	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 2015 SELVA MADERA COURT	Transaction ID: A2008-1153113
	City State Zip Code ATLANTIC BEACH FL 32233	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 458.70	

B.	Full Name (Last, First, Middle Initial) GARY S STERE	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2015 SELVA MADERA COURT	Transaction ID: A2008-1152677
	City State Zip Code ATLANTIC BEACH FL 32233	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 497.70	

C.	Full Name (Last, First, Middle Initial) MYRON E STOUFFER	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1528 JESSICA LANE	Transaction ID: A2008-1153109
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 23.03
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP State Team Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 269.86	

SUBTOTAL of Receipts This Page (optional)	101.03
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: PAGE 193 / 242
(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)
MYRON E STOFFER

Mailing Address 1528 JESSICA LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing federal political committee. C

Name of Employer: Allstate Insurance Company Occupation: AVP State Team

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.89

Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152673

Amount of Each Receipt this Period 23.03

B. Full Name (Last, First, Middle Initial)
CHRISTINE A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City State Zip Code
GURNEE IL 60031

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 ▼ 306.28

Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153002

Amount of Each Receipt this Period 25.94

C. Full Name (Last, First, Middle Initial)
CHRISTINE A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City State Zip Code
GURNEE IL 60031

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 ▼ 332.22

Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152569

Amount of Each Receipt this Period 25.94

SUBTOTAL of Receipts This Page (optional) 74.91

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 194 / 242
(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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1154.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	8

Transaction ID: A2008-1153390

Amount of Each Receipt this Period
97.37

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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1251.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: A2008-1152953

Amount of Each Receipt this Period
97.37

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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 659.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	8

Transaction ID: A2008-1153165

Amount of Each Receipt this Period
55.75

SUBTOTAL of Receipts This Page (optional) ► **250.49**

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 195 / 242
(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)
KATHLEEN A SWAIN
Mailing Address 242 HIGHVIEW
City ELMHURST State IL Zip Code 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 ▼ 715.30
Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152728
Amount of Each Receipt this Period 55.75

B. Full Name (Last, First, Middle Initial)
JERROLD S SZOSTAK
Mailing Address 1064 W GLENN TRAIL
City ELK GROVE State IL Zip Code 60007
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Claim Reserve Director
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 458.03
Date of Receipt 06 / 06 / 2008
Transaction ID: A2008-1153208
Amount of Each Receipt this Period 38.64

C. Full Name (Last, First, Middle Initial)
JERROLD S SZOSTAK
Mailing Address 1064 W GLENN TRAIL
City ELK GROVE State IL Zip Code 60007
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Claim Reserve Director
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 496.67
Date of Receipt 06 / 20 / 2008
Transaction ID: A2008-1152771
Amount of Each Receipt this Period 38.64

SUBTOTAL of Receipts This Page (optional) ► 133.03
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 196 / 242
	<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) CARL J TACKETT		Date of Receipt
	Mailing Address 307 WENDRON 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 06 / 20 / 2008
	City	State	Zip Code
	FRANKLIN	TN	37069
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152737
Name of Employer Allstate Insurance Company		Occupation Regional Financial Servic	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 ▼ 205.91	16.02

B.	Full Name (Last, First, Middle Initial) BENJAMIN A TARVER		Date of Receipt
	Mailing Address 2495 EMERALD LANE		<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 06 / 06 / 2008
	City	State	Zip Code
	LINDENHURST	IL	60046
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153049
Name of Employer Allstate Insurance Company		Occupation AVP Corporate Security	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 ▼ 268.89	22.77

C.	Full Name (Last, First, Middle Initial) BENJAMIN A TARVER		Date of Receipt
	Mailing Address 2495 EMERALD LANE		<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 06 / 20 / 2008
	City	State	Zip Code
	LINDENHURST	IL	60046
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152614
Name of Employer Allstate Insurance Company		Occupation AVP Corporate Security	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 ▼ 291.66	22.77

SUBTOTAL of Receipts This Page (optional)	61.56
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 197 / 242
(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)
JANICE M TAYLOR

Mailing Address 7335 ATHLONE

City HOUSTON State TX Zip Code 77088

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

Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.32

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153363

Amount of Each Receipt this Period 23.21

B. Full Name (Last, First, Middle Initial)
JANICE M TAYLOR

Mailing Address 7335 ATHLONE

City HOUSTON State TX Zip Code 77088

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

Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 297.53

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152926

Amount of Each Receipt this Period 23.21

C. Full Name (Last, First, Middle Initial)
LINDSAY F TAYLOR

Mailing Address 217 E. SHERIDAN PLACE

City LAKE BLUFF State IL Zip Code 60044

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.55

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152984

Amount of Each Receipt this Period 16.35

SUBTOTAL of Receipts This Page (optional) ▶ 62.77

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 198 / 242
(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)
TIMOTHY J TAYLOR

Mailing Address 5314 RENEE AVE.

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.69

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153097

Amount of Each Receipt this Period
18.82

B. Full Name (Last, First, Middle Initial)
TIMOTHY J TAYLOR

Mailing Address 5314 RENEE AVE.

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.51

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152661

Amount of Each Receipt this Period
18.82

C. Full Name (Last, First, Middle Initial)
PHILLIP J TELGENHOFF

Mailing Address 1631 DAUNTING DRIVE

City State Zip Code
EL DORADO HILLS CA 95762

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.67

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153410

Amount of Each Receipt this Period
18.46

SUBTOTAL of Receipts This Page (optional) ► 56.10

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 199 / 242
(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)
PHILLIP J TELGENHOFF

Mailing Address 1631 DAUNTING DRIVE

City State Zip Code
EL DORADO HILLS CA 95762

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.13

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152973

Amount of Each Receipt this Period
18.46

B. Full Name (Last, First, Middle Initial)
SEAN D THAKUR

Mailing Address 4657 LAKE POINT CIRCLE

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation Service Center Senior Man

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.10

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152918

Amount of Each Receipt this Period
15.51

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

Mailing Address 604 Brier Street

City State Zip Code
Kenilworth IL 60043

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

Name of Employer Allstate Insurance Company Occupation Corporate Real Estate Dir

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.26

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153431

Amount of Each Receipt this Period
19.88

SUBTOTAL of Receipts This Page (optional) ► 53.85

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 / 242
	<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 Thomas		Date of Receipt
	Mailing Address 604 Brier Street		<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 06 / 20 / 2008
	City	State	Zip Code
	Kenilworth	IL	60043
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152995
Name of Employer Allstate Insurance Company		Occupation Corporate Real Estate Dir	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"/> 256.14	<input type="text"/> 19.88

B.	Full Name (Last, First, Middle Initial) MARK L THOMPSON		Date of Receipt
	Mailing Address 3233 N RACINE #2		<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 06 / 06 / 2008
	City	State	Zip Code
	CHICAGO	IL	60657
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153372
Name of Employer Allstate Insurance Company		Occupation AVP-PRODUCT NON-STANDARD	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"/> 312.25	<input type="text"/> 26.65

C.	Full Name (Last, First, Middle Initial) MARK L THOMPSON		Date of Receipt
	Mailing Address 3233 N RACINE #2		<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 06 / 20 / 2008
	City	State	Zip Code
	CHICAGO	IL	60657
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152935
Name of Employer Allstate Insurance Company		Occupation AVP-PRODUCT NON-STANDARD	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"/> 338.90	<input type="text"/> 26.65

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 73.18
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 201 / 242
(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)
W. J THOMPSON

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 463.37

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153098

Amount of Each Receipt this Period
38.91

B.

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

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 502.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152662

Amount of Each Receipt this Period
38.91

C.

Full Name (Last, First, Middle Initial)
ROBERT J TIERNEY

Mailing Address 6628 RFD-CARRIAGE WAY

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation Procurement Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.56

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153179

Amount of Each Receipt this Period
19.88

SUBTOTAL of Receipts This Page (optional) ► **97.70**

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: (check only one)	PAGE 202 / 242
	<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 J TIERNEY	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 6628 RFD-CARRIAGE WAY	Transaction ID: A2008-1152742
	City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 19.88
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Procurement Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 258.44	

B.	Full Name (Last, First, Middle Initial) LOREE E TOEDMAN	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 21949 HICKORY HILL DR.	Transaction ID: A2008-1153392
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 40.75
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: AVP ENCOMPASS FIELD DISTR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 478.40	

C.	Full Name (Last, First, Middle Initial) LOREE E TOEDMAN	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 21949 HICKORY HILL DR.	Transaction ID: A2008-1152955
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 40.75
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: AVP ENCOMPASS FIELD DISTR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 519.15	

SUBTOTAL of Receipts This Page (optional)	101.38
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 203 / 242
(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)
ROBERT E TRANSON
 Mailing Address 2644 N DOUGLAS
 City State Zip Code
 ARLINGTON HTS IL 60004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 6 / 2 0 0 8
Transaction ID: A2008-1153221
 Amount of Each Receipt this Period
 28.53
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation AVP Strategic Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.26

B. Full Name (Last, First, Middle Initial)
ROBERT E TRANSON
 Mailing Address 2644 N DOUGLAS
 City State Zip Code
 ARLINGTON HTS IL 60004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 8
Transaction ID: A2008-1152784
 Amount of Each Receipt this Period
 28.53
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation AVP Strategic Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.79

C. Full Name (Last, First, Middle Initial)
MELINDA S TUNNER
 Mailing Address 5430 TALL OAKS DRIVE
 City State Zip Code
 LONG GROVE IL 60047
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 6 / 2 0 0 8
Transaction ID: A2008-1153348
 Amount of Each Receipt this Period
 47.07
 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 ▼ 551.54

SUBTOTAL of Receipts This Page (optional) ► 104.13
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 204 / 242
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MELINDA S TUNNER	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 5430 TALL OAKS DRIVE	Transaction ID: A2008-1152913
	City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 47.07
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company	Occupation AVP Agency Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 598.61	

B.	Full Name (Last, First, Middle Initial) RICHARD D TURANO	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 4960 S CHESTER ST	Transaction ID: A2008-1153030
	City State Zip Code ENGLEWOOD CO 80111	Amount of Each Receipt this Period 18.40
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company	Occupation Home Office Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.10	

C.	Full Name (Last, First, Middle Initial) RICHARD D TURANO	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 4960 S CHESTER ST	Transaction ID: A2008-1152596
	City State Zip Code ENGLEWOOD CO 80111	Amount of Each Receipt this Period 18.40
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company	Occupation Home Office Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.50	

SUBTOTAL of Receipts This Page (optional)	83.87
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 205 / 242
(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)
DAVID J UNROE

Mailing Address 326 ELM CT.

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation Field Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.56

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153414
 Amount of Each Receipt this Period: 19.88

B.

Full Name (Last, First, Middle Initial)
DAVID J UNROE

Mailing Address 326 ELM CT.

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation Field Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 258.44

Date of Receipt: 06 / 20 / 2008
Transaction ID: A2008-1152977
 Amount of Each Receipt this Period: 19.88

C.

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

Mailing Address 636 BALMORAL LANE

City INVERNESS State IL Zip Code 60067

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 635.48

Date of Receipt: 06 / 06 / 2008
Transaction ID: A2008-1153229
 Amount of Each Receipt this Period: 53.99

SUBTOTAL of Receipts This Page (optional) ► 93.75

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 206 / 242
(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 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 ▼ 689.47

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152792

Amount of Each Receipt this Period
53.99

B. Full Name (Last, First, Middle Initial)
HELEN K VAN DAAL

Mailing Address 1300 LONGVALLEY RD.

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.98

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153168

Amount of Each Receipt this Period
19.42

C. Full Name (Last, First, Middle Initial)
HELEN K VAN DAAL

Mailing Address 1300 LONGVALLEY RD.

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.40

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152731

Amount of Each Receipt this Period
19.42

SUBTOTAL of Receipts This Page (optional) ► 92.83

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

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

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

FOR LINE NUMBER: PAGE 207 / 242
(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)
JOHN W VAN ETTEN
 Mailing Address 924 W. Gordon Terrace #3
 City Chicago State IL Zip Code 60613
 Date of Receipt MM / DD / YYYY 06 / 06 / 2008
Transaction ID: A2008-1153280
 Amount of Each Receipt this Period 17.53
 FEC ID number of contributing federal political committee. C
 Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.36

B. Full Name (Last, First, Middle Initial)
JOHN W VAN ETTEN
 Mailing Address 924 W. Gordon Terrace #3
 City Chicago State IL Zip Code 60613
 Date of Receipt MM / DD / YYYY 06 / 20 / 2008
Transaction ID: A2008-1152844
 Amount of Each Receipt this Period 24.43
 FEC ID number of contributing federal political committee. C
 Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.79

C. Full Name (Last, First, Middle Initial)
WILLIAM P VANDERBORG
 Mailing Address 561 W CROOKED STICK CT
 City VERNON HILLS State IL Zip Code 60061
 Date of Receipt MM / DD / YYYY 06 / 06 / 2008
Transaction ID: A2008-1153164
 Amount of Each Receipt this Period 32.70
 FEC ID number of contributing federal political committee. C
 Name of Employer Allstate Insurance Company Occupation Claims Senior Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 392.40

SUBTOTAL of Receipts This Page (optional) ► 74.66
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 208 / 242

(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 P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Occupation
Allstate Insurance Company Claims Senior Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.10

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152727

Amount of Each Receipt this Period

32.70

B.

Full Name (Last, First, Middle Initial)
PATRICIA C VANLAMMEREN

Mailing Address 9868 PALACE GREEN WAY

City State Zip Code
VIENNA VA 22181

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 ▼ 587.78

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153386

Amount of Each Receipt this Period

55.77

C.

Full Name (Last, First, Middle Initial)
PATRICIA C VANLAMMEREN

Mailing Address 9868 PALACE GREEN WAY

City State Zip Code
VIENNA VA 22181

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 ▼ 643.55

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152949

Amount of Each Receipt this Period

55.77

SUBTOTAL of Receipts This Page (optional)

144.24

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 209 / 242
(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)
BILL VASILOGAMBROS

Mailing Address 1309 S. PINE AVE

City ARLINGTON HTS. State IL Zip Code 60005

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

Name of Employer Allstate Insurance Company Occupation Field Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.69

Date of Receipt 06 / 06 / 2008

Transaction ID: A2008-1153302

Amount of Each Receipt this Period 17.10

B. Full Name (Last, First, Middle Initial)
BILL VASILOGAMBROS

Mailing Address 1309 S. PINE AVE

City ARLINGTON HTS. State IL Zip Code 60005

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

Name of Employer Allstate Insurance Company Occupation Field Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.79

Date of Receipt 06 / 20 / 2008

Transaction ID: A2008-1152866

Amount of Each Receipt this Period 17.10

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

Mailing Address 2514 S WESLEY AVENUE

City BERWYN State IL Zip Code 60402

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 ▼ 470.47

Date of Receipt 06 / 06 / 2008

Transaction ID: A2008-1153156

Amount of Each Receipt this Period 39.61

SUBTOTAL of Receipts This Page (optional) ► 73.81

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 210 / 242
	<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 VAVRA	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2514 S WESLEY AVENUE	Transaction ID: A2008-1152719
	City State Zip Code BERWYN IL 60402	Amount of Each Receipt this Period 39.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 510.08	

B.	Full Name (Last, First, Middle Initial) MICHAEL J VELOTTA	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1111 LOYOLA DR	Transaction ID: A2008-1153350
	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 ▼ 924.48	

C.	Full Name (Last, First, Middle Initial) MICHAEL J VELOTTA	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1111 LOYOLA DR	Transaction ID: A2008-1152915
	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 ▼ 1001.52	

SUBTOTAL of Receipts This Page (optional)	193.69
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 211 / 242
(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)
STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Allstate Insurance Company Occupation Vice President & Treasure

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 827.94

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153044

Amount of Each Receipt this Period
70.12

B.

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

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Allstate Insurance Company Occupation Vice President & Treasure

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 898.06

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152610

Amount of Each Receipt this Period
70.12

C.

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 ▼ 583.63

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153429

Amount of Each Receipt this Period
49.81

SUBTOTAL of Receipts This Page (optional) ► **190.05**

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 212 / 242
(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)
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 ▼ 633.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152993

Amount of Each Receipt this Period
49.81

B. Full Name (Last, First, Middle Initial)
MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City State Zip Code
CLOVIS CA 93611

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.16

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153129

Amount of Each Receipt this Period
28.43

C. Full Name (Last, First, Middle Initial)
MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City State Zip Code
CLOVIS CA 93611

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 369.59

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152693

Amount of Each Receipt this Period
28.43

SUBTOTAL of Receipts This Page (optional) ► **106.67**

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 213 / 242
(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

<p>A. Full Name (Last, First, Middle Initial) ANTON WANDERON</p> <p>Mailing Address 112 BRISTOL PLACE</p> <p>City State Zip Code PONTE VEDRA FL 32082</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation DIRECTOR CREDIT DEPARTMEN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 761.52</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153112</p> <p>Amount of Each Receipt this Period 63.46</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) ANTON WANDERON</p> <p>Mailing Address 112 BRISTOL PLACE</p> <p>City State Zip Code PONTE VEDRA FL 32082</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation DIRECTOR CREDIT DEPARTMEN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 824.98</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152676</p> <p>Amount of Each Receipt this Period 63.46</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) THOMAS M WARDEN</p> <p>Mailing Address 146 LA GRANDE</p> <p>City State Zip Code MOSS BEACH CA 94038</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation AVP Research Center</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 394.24</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153124</p> <p>Amount of Each Receipt this Period 33.52</p>
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SUBTOTAL of Receipts This Page (optional)	160.44
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 214 / 242
(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 M WARDEN

Mailing Address 146 LA GRANDE

City State Zip Code
MOSS BEACH CA 94038

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

Name of Employer Occupation
Allstate Insurance Company AVP Research Center

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 427.76

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152688

Amount of Each Receipt this Period

33.52

B.

Full Name (Last, First, Middle Initial)
EDWIN L WASINGER, jr

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Occupation
Allstate Insurance Company Procurement Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.71

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153299

Amount of Each Receipt this Period

36.48

C.

Full Name (Last, First, Middle Initial)
EDWIN L WASINGER, jr

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Occupation
Allstate Insurance Company Procurement Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 467.19

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152863

Amount of Each Receipt this Period

36.48

SUBTOTAL of Receipts This Page (optional) ▶

106.48

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: (check only one)	PAGE 215 / 242
	<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) JOHN A WATSON	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 10227 Thurston Groves Blvd.	Transaction ID: A2008-1152960
	City State Zip Code Seminole FL 33778	Amount of Each Receipt this Period 16.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.55

B.	Full Name (Last, First, Middle Initial) DOUGLAS B WELCH	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1724 INDEPENDENCE AVE	Transaction ID: A2008-1153144
	City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 57.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 678.17

C.	Full Name (Last, First, Middle Initial) DOUGLAS B WELCH	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1724 INDEPENDENCE AVE	Transaction ID: A2008-1152707
	City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 57.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 735.38

SUBTOTAL of Receipts This Page (optional)	130.77
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 216 / 242
(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)
JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Bank Cash Management Dire

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 381.70

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153374

Amount of Each Receipt this Period
32.20

B.

Full Name (Last, First, Middle Initial)
JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Bank Cash Management Dire

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 413.90

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152937

Amount of Each Receipt this Period
32.20

C.

Full Name (Last, First, Middle Initial)
ROBERT J WHITE

Mailing Address 909 STILLWATER COURT

City State Zip Code
WESTON FL 33327

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 413.34

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153061

Amount of Each Receipt this Period
34.87

SUBTOTAL of Receipts This Page (optional) ► 99.27

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 217 / 242
	<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 J WHITE	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 909 STILLWATER COURT	Transaction ID: A2008-1152626
	City WESTON State FL Zip Code 33327	Amount of Each Receipt this Period 34.87
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Territorial Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 448.21	

B.	Full Name (Last, First, Middle Initial) SAMUEL W WHITEMAN	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 120 NE STONELEDGE PLACE	Transaction ID: A2008-1153364
	City LEESBURG State VA Zip Code 20176	Amount of Each Receipt this Period 33.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claims Senior Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 386.31	

C.	Full Name (Last, First, Middle Initial) SAMUEL W WHITEMAN	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 120 NE STONELEDGE PLACE	Transaction ID: A2008-1152927
	City LEESBURG State VA Zip Code 20176	Amount of Each Receipt this Period 33.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claims Senior Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 419.96	

SUBTOTAL of Receipts This Page (optional)	102.17
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 218 / 242
(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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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)
CYNTHIA A WHITFIELD

Mailing Address 135 CAMBRIDGE DR.

City State Zip Code
AURORA OH 44202

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

Name of Employer Allstate Insurance Company Occupation Risk Management Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.33

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153048

Amount of Each Receipt this Period
18.39

B. Full Name (Last, First, Middle Initial)
CYNTHIA A WHITFIELD

Mailing Address 135 CAMBRIDGE DR.

City State Zip Code
AURORA OH 44202

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

Name of Employer Allstate Insurance Company Occupation Risk Management Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.72

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152613

Amount of Each Receipt this Period
18.39

C. Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 461.65

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153100

Amount of Each Receipt this Period
39.10

SUBTOTAL of Receipts This Page (optional) ► 75.88

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 219 / 242
(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)
CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.75

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152664

Amount of Each Receipt this Period
39.10

B.

Full Name (Last, First, Middle Initial)
ROB WHOLF

Mailing Address 847 INTERLAKEN DRIVE

City State Zip Code
LAKE ZURICH IL 60047

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 ▼ 261.48

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153136

Amount of Each Receipt this Period
21.79

C.

Full Name (Last, First, Middle Initial)
ROB WHOLF

Mailing Address 847 INTERLAKEN DRIVE

City State Zip Code
LAKE ZURICH IL 60047

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 ▼ 283.27

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152699

Amount of Each Receipt this Period
21.79

SUBTOTAL of Receipts This Page (optional) ► **82.68**

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 220 / 242
(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

<p>A. Full Name (Last, First, Middle Initial) JOHN K WILCOX</p> <p>Mailing Address 1120 JESSICA LANE</p> <p>City State Zip Code LIBERTYVILLE IL 60048</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Product Operations Direct</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 390.72</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153177</p> <p>Amount of Each Receipt this Period 32.96</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) JOHN K WILCOX</p> <p>Mailing Address 1120 JESSICA LANE</p> <p>City State Zip Code LIBERTYVILLE IL 60048</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Product Operations Direct</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 423.68</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152740</p> <p>Amount of Each Receipt this Period 32.96</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) ANISE D WILEY-LITTLE</p> <p>Mailing Address 21030 W YORKSHIRE DR</p> <p>City State Zip Code KILDEER IL 60047</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Human Resource Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 537.90</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153393</p> <p>Amount of Each Receipt this Period 47.65</p>
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SUBTOTAL of Receipts This Page (optional)	113.57
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: PAGE 221 / 242
(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)
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 Allstate Insurance Company Occupation Human Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.55

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152956

Amount of Each Receipt this Period
47.65

B.

Full Name (Last, First, Middle Initial)
JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City State Zip Code
CLARKSVILLE MD 21029

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 ▼ 473.36

Date of Receipt
M M / D D / Y Y Y Y
06 / 06 / 2008

Transaction ID: A2008-1153211

Amount of Each Receipt this Period
39.93

C.

Full Name (Last, First, Middle Initial)
JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City State Zip Code
CLARKSVILLE MD 21029

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 ▼ 513.29

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152774

Amount of Each Receipt this Period
39.93

SUBTOTAL of Receipts This Page (optional) ► **127.51**

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 222 / 242		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) THOMAS J WILSON	Date of Receipt
	Mailing Address 2024 N. MOHAWK	<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City State Zip Code CHICAGO IL 60614	Transaction ID: A2008-1153320
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="244.62"/>
	Name of Employer: Allstate Insurance Company Occupation: President & COO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="2820.04"/>	

B.	Full Name (Last, First, Middle Initial) THOMAS J WILSON	Date of Receipt
	Mailing Address 2024 N. MOHAWK	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City State Zip Code CHICAGO IL 60614	Transaction ID: A2008-1152885
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="244.62"/>
	Name of Employer: Allstate Insurance Company Occupation: President & COO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="3064.66"/>	

C.	Full Name (Last, First, Middle Initial) KURT L WINTER	Date of Receipt
	Mailing Address 1403 N. WALNUT	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City State Zip Code ARLINGTON HGHTS IL 60004	Transaction ID: A2008-1152991
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="16.97"/>
	Name of Employer: Allstate Insurance Company Occupation: Marketing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="215.81"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="506.21"/>
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 223 / 242
	(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) BRUCE A WOIKE	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1318 N. CHESTNUT AVE.	Transaction ID: A2008-1153291
	City State Zip Code ARLINGTON HTS. IL 60004	Amount of Each Receipt this Period 19.88
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Accounting Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 269.58	

B.	Full Name (Last, First, Middle Initial) BRUCE A WOIKE	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1318 N. CHESTNUT AVE.	Transaction ID: A2008-1152855
	City State Zip Code ARLINGTON HTS. IL 60004	Amount of Each Receipt this Period 19.88
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Accounting Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 289.46	

C.	Full Name (Last, First, Middle Initial) MATTHEW WOJTASZEK	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 7 WELLESLEY COURT	Transaction ID: A2008-1153046
	City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 32.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Senior Field Operations M Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 379.20	

SUBTOTAL of Receipts This Page (optional)	72.06
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 224 / 242
	<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) MATTHEW WOJTASZEK	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 7 WELLESLEY COURT	Transaction ID: A2008-1152612
	City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 32.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior Field Operations M Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 411.50	

B.	Full Name (Last, First, Middle Initial) RHONDA WOODARD	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 2341 MARCY AVENUE	Transaction ID: A2008-1153384
	City State Zip Code EVANSTON IL 60201	Amount of Each Receipt this Period 35.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP-PRODUCT DELIVERY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 427.78	

C.	Full Name (Last, First, Middle Initial) RHONDA WOODARD	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2341 MARCY AVENUE	Transaction ID: A2008-1152947
	City State Zip Code EVANSTON IL 60201	Amount of Each Receipt this Period 35.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP-PRODUCT DELIVERY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 463.72	

SUBTOTAL of Receipts This Page (optional)	104.18
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 225 / 242
(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

<p>A. Full Name (Last, First, Middle Initial) DONALD F WYATT, jr</p> <p>Mailing Address 811 DRESSER DR.</p> <p>City State Zip Code MT PROSPECT IL 60056</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation CC IT Systems Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 425.94</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153183</p> <p>Amount of Each Receipt this Period 36.07</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) DONALD F WYATT, jr</p> <p>Mailing Address 811 DRESSER DR.</p> <p>City State Zip Code MT PROSPECT IL 60056</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation CC IT Systems Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 462.01</p>	<p>Date of Receipt 06 / 20 / 2008</p> <p>Transaction ID: A2008-1152746</p> <p>Amount of Each Receipt this Period 36.07</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) FLOYD M YAGER</p> <p>Mailing Address 1610 BIRCH LANE</p> <p>City State Zip Code PARK RIDGE IL 60068</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Assistant Field Vice Pres</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 584.53</p>	<p>Date of Receipt 06 / 06 / 2008</p> <p>Transaction ID: A2008-1153254</p> <p>Amount of Each Receipt this Period 49.89</p>
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SUBTOTAL of Receipts This Page (optional)	122.03
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: PAGE 226 / 242
(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 Occupation
Allstate Insurance Company Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 634.42

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152817

Amount of Each Receipt this Period

49.89

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 Occupation
Allstate Insurance Company AVP Procurement

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 619.42

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153262

Amount of Each Receipt this Period

52.46

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 Occupation
Allstate Insurance Company AVP Procurement

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 671.88

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152825

Amount of Each Receipt this Period

52.46

SUBTOTAL of Receipts This Page (optional) ▶

154.81

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 227 / 242
	<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) RICHARD P YOCIUS		Date of Receipt
	Mailing Address 40135 N GOLDENROD		<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 06 / 06 / 2008
	City	State	Zip Code
	WADSWORTH	IL	60083
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153185
Name of Employer Allstate Insurance Company		Occupation Senior State Manager	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 ▼ 501.00	<input type="text"/> 41.75

B.	Full Name (Last, First, Middle Initial) RICHARD P YOCIUS		Date of Receipt
	Mailing Address 40135 N GOLDENROD		<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 06 / 20 / 2008
	City	State	Zip Code
	WADSWORTH	IL	60083
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1152748
Name of Employer Allstate Insurance Company		Occupation Senior State Manager	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 ▼ 542.75	<input type="text"/> 41.75

C.	Full Name (Last, First, Middle Initial) JAMES E YOUNG		Date of Receipt
	Mailing Address 1212 N. WELLS ST. APT. 1504		<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 06 / 06 / 2008
	City	State	Zip Code
	CHICAGO	IL	60610
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-1153085
Name of Employer Allstate Insurance Company		Occupation CC IT Senior Manager	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 ▼ 220.20	<input type="text"/> 18.65

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 102.15
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 228 / 242
	(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) JAMES E YOUNG		Date of Receipt
	Mailing Address 1212 N. WELLS ST. APT. 1504		<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	CHICAGO	IL	60610
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation CC IT Senior Manager	Transaction ID: A2008-1152649
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="238.85"/>	<input type="text" value="18.65"/>

B.	Full Name (Last, First, Middle Initial) PHILLIP C YOUNG		Date of Receipt
	Mailing Address 2181 APPLE HILL LANE		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	BUFFALO GROVE	IL	60089
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation Director of Flight Operat	Transaction ID: A2008-1153216
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="223.26"/>	<input type="text" value="18.98"/>

C.	Full Name (Last, First, Middle Initial) PHILLIP C YOUNG		Date of Receipt
	Mailing Address 2181 APPLE HILL LANE		<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	BUFFALO GROVE	IL	60089
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation Director of Flight Operat	Transaction ID: A2008-1152779
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="242.24"/>	<input type="text" value="18.98"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="56.61"/>
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 229 / 242
(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 E ZAGORSKI

Mailing Address 2609 N PINE AVE

City State Zip Code
ARLINGTON HEIGHTS IL 60004

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

Name of Employer Occupation
Allstate Insurance Company Personal Lines Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 404.32

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153252

Amount of Each Receipt this Period

34.11

B.

Full Name (Last, First, Middle Initial)
MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City State Zip Code
ARLINGTON HEIGHTS IL 60004

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

Name of Employer Occupation
Allstate Insurance Company Personal Lines Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 438.43

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 8

Transaction ID: A2008-1152815

Amount of Each Receipt this Period

34.11

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 Occupation
Allstate Insurance Company AVP Allstate Life Service

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 794.83

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: A2008-1153335

Amount of Each Receipt this Period

67.29

SUBTOTAL of Receipts This Page (optional) ▶

135.51

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 230 / 242
(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 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 ▼
862.12

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152900

Amount of Each Receipt this Period
67.29

B. Full Name (Last, First, Middle Initial)
ROBERT F ZEMBRASKI, jr

Mailing Address 1113 W WRIGHTWOOD # 1E

City State Zip Code
CHICAGO IL 60614

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

Name of Employer
Allstate Insurance Company

Occupation
Consultant-M2600

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.46

Date of Receipt
MM / DD / YYYY
06 / 20 / 2008

Transaction ID: A2008-1152575

Amount of Each Receipt this Period
15.77

C. Full Name (Last, First, Middle Initial)
PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
VILLA PARK IL 60181

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 ▼
232.96

Date of Receipt
MM / DD / YYYY
06 / 06 / 2008

Transaction ID: A2008-1153306

Amount of Each Receipt this Period
19.73

SUBTOTAL of Receipts This Page (optional) ► **102.79**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 / 242
	<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) PAUL K ZIGTERMAN	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 236 SOUTH RIVERSIDE DRIVE	Transaction ID: A2008-1152871
	City State Zip Code VILLA PARK IL 60181	Amount of Each Receipt this Period 19.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.69	

B.	Full Name (Last, First, Middle Initial) GERALD L ZIMMERMAN, jr	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 2584 Sutton Lane	Transaction ID: A2008-1153325
	City State Zip Code AURORA IL 60502	Amount of Each Receipt this Period 37.75
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 444.00	

C.	Full Name (Last, First, Middle Initial) GERALD L ZIMMERMAN, jr	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2584 Sutton Lane	Transaction ID: A2008-1152890
	City State Zip Code AURORA IL 60502	Amount of Each Receipt this Period 37.75
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 481.75	

SUBTOTAL of Receipts This Page (optional)	95.23
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 232 / 242
	<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) CARLA D ZUNIGA	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 2189 N. BEAVER CREEK DRIVE	Transaction ID: A2008-1153389
	City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 21.91
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Field Operations Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.67

B.	Full Name (Last, First, Middle Initial) CARLA D ZUNIGA	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2189 N. BEAVER CREEK DRIVE	Transaction ID: A2008-1152952
	City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 21.91
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Field Operations Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.58

C.	Full Name (Last, First, Middle Initial) J K ZUZICH	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1125 ACORN TRAIL	Transaction ID: A2008-1153380
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 35.83
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP HR People Planning & Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 426.46

SUBTOTAL of Receipts This Page (optional)	79.65
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 233 / 242
(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)
J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
Allstate Insurance Company AVP HR People Planning &

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.29

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2008

Transaction ID: A2008-1152943

Amount of Each Receipt this Period
35.83

SUBTOTAL of Receipts This Page (optional)	▶	35.83
TOTAL This Period (last page this line number only)	▶	26049.30

**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 234 / 242

<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
Bank Service Charge

Candidate Name
Fifth Third Bank

Office Sought: House
 Senate
 President

State: IL District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B220161

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 235 / 242

<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

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) Barney Frank for Congress Committee <hr/> Mailing Address 30 Ivy Street SE <hr/> City Washington State DC Zip Code 20003 Purpose of Disbursement Contribution Candidate Name Barney Frank Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 04 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B216895 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type: 011
B. Full Name (Last, First, Middle Initial) Kilpatrick for Congress <hr/> Mailing Address 499 S. Capitol Street SW Suite 404 <hr/> City Washington State DC Zip Code 20003 Purpose of Disbursement Contribution Candidate Name Carolyn Cheeks Kilpatrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 13 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B217958 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type: 011
C. Full Name (Last, First, Middle Initial) Johanns for U.S. Senate <hr/> Mailing Address 1201 O Street Suite 101 <hr/> City Lincoln State NE Zip Code 68508 Purpose of Disbursement Contribution Candidate Name Mike Johanns Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B216894 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00 Category/Type: 011

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 236 / 242

<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 Charlie Wilson	Transaction ID: B218337 Date of Disbursement 06 / 19 / 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Jeb Hensarling	Transaction ID: B218338 Date of Disbursement 06 / 19 / 2008
	Mailing Address PO Box 820504	Amount of Each Disbursement this Period 1000.00
	City Dallas State TX Zip Code 75382	
	Purpose of Disbursement Contribution Candidate Name Jeb Hensarling	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Council of Life Insurers PAC	Transaction ID: B217959 Date of Disbursement 06 / 16 / 2008
	Mailing Address 101 Constitution Ave. NW	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement Contribution Candidate Name American Council of Life Insurers PAC	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)	7000.00
TOTAL This Period (last page this line number only)	11000.00

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

<p>A. Full Name (Last, First, Middle Initial) Friends of John Astle</p> <p>Mailing Address 51 Fleet Street</p> <p>City Annapolis State MD Zip Code 21401</p> <p>Purpose of Disbursement O-2010 State Senate 30 MD</p> <p>Candidate Name John C. Astle</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B216554 Date of Disbursement 06 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Barry Glassman</p> <p>Mailing Address PO Box 273</p> <p>City Churchville State MD Zip Code 21028</p> <p>Purpose of Disbursement O-2010 State Senate 35 MD</p> <p>Candidate Name Barry Glassman</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B216893 Date of Disbursement 06 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Tax Payers for Roy Ashburn ID#1296641</p> <p>Mailing Address 2813 Kingman Court</p> <p>City Modesto State CA Zip Code 95355</p> <p>Purpose of Disbursement P-2010 State Senate 18 CA</p> <p>Candidate Name Roy Ashburn</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p>Transaction ID: B217003 Date of Disbursement 06 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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 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)
Garrick for Assembly 2008 ID#1294234

Mailing Address P.O. Box 471

City Sacramento State CA Zip Code 95812

Purpose of Disbursement
G-2008 State House 74 CA

011
Category/
Type

Candidate Name
Martin W Garrick

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: B217005
Date of Disbursement

06 / 09 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Doug LaMalfa Cmte Sen 2010 ID#1293102

Mailing Address P.O. Box 471

City Sacramento State CA Zip Code 95812

Purpose of Disbursement
P-2010 State Senate 4 CA

011
Category/
Type

Candidate Name
Doug La Malfa

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B217006
Date of Disbursement

06 / 09 / 2008

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Pedro Nava 2008 ID#1293442

Mailing Address 1005 12th Street Suite H

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
G-2008 State House 35 CA

011
Category/
Type

Candidate Name
Pedro Nava

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: B217007
Date of Disbursement

06 / 09 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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 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)
George Runner for Senate-'08 #1272115

Mailing Address PO Box 471

City Sacramento State CA Zip Code 95812

Purpose of Disbursement
G-2008 State Senate 17 CA

Candidate Name
George Runner

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B217008
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

B. Full Name (Last, First, Middle Initial)
MO Insurance Coalition (MIC-PAC)

Mailing Address 220 Madison St.

City Jefferson City State MO Zip Code 65101

Purpose of Disbursement
O-2008 State PAC MO

Candidate Name
MO Insurance Coalition (MIC-PAC)

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Transaction ID: B217308
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

C. Full Name (Last, First, Middle Initial)
Friends of Bonnie Garcia 2010 #1293456

Mailing Address PO Box 471

City Sacramento State CA Zip Code 95812

Purpose of Disbursement
P-2010 State Senate 40 CA

Candidate Name
Bonnie Garcia

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B217309
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

<p>A. Full Name (Last, First, Middle Initial) Citizens for Sara Feigenholtz</p> <p>Mailing Address 3213 N. Wilton Ave.</p> <p>City Chicago State IL Zip Code 60657</p> <p>Purpose of Disbursement G-2008 State House 12 IL</p> <p>Candidate Name Sara Feigenholtz</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B218185 Date of Disbursement 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Hoeven Committee</p> <p>Mailing Address P.O. Box 952</p> <p>City Bismarck State ND Zip Code 58502</p> <p>Purpose of Disbursement G-2008 Governor ND</p> <p>Candidate Name John H. Hoeven</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B218186 Date of Disbursement 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Citizens for Matt Murphy</p> <p>Mailing Address 952 North Arrowhead Dr.</p> <p>City Palatine State IL Zip Code 60074</p> <p>Purpose of Disbursement G-2008 State Senate 27 IL</p> <p>Candidate Name Matt Murphy</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B218182 Date of Disbursement 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

<p>A. Full Name (Last, First, Middle Initial) Citizens for Jo Ann Osmond</p> <p>Mailing Address PO Box 635</p> <p>City Antioch State IL Zip Code 60002</p> <p>Purpose of Disbursement G-2008 State House 61 IL</p> <p>Candidate Name Joann Osmond</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B218184 Date of Disbursement 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Citizens for Sullivan</p> <p>Mailing Address 209 North Lincoln Ave.</p> <p>City Mundelein State IL Zip Code 60060</p> <p>Purpose of Disbursement G-2008 State House 51 IL</p> <p>Candidate Name Ed Sullivan</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B218183 Date of Disbursement 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Citizens to Elect Tom Cross</p> <p>Mailing Address 24047 W. Lockport St. Suite 201</p> <p>City Plainfield State IL Zip Code 60544</p> <p>Purpose of Disbursement G-2008 State House 84 IL</p> <p>Candidate Name Tom Cross</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B213310 Date of Disbursement 06 / 20 / 2008</p> <p>Amount of Each Disbursement this Period -500.00</p> <p>011 Category/ Type</p> <p>Check Voided. Original check date 4/30/08.</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

14500.00

Image# 28991486353

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.
