FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

Allstate Insurance Company PAC

ADDRESS (number and street) ▼ 2775 Sanders Road Suite A2W

☐ Check if different than previously reported. (ACC)

Northbrook | IL | 60062 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00040253

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

☒ Feb 20 (M2)	☐ May 20 (M5)	☐ Aug 20 (M8)	☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3)	☐ Jun 20 (M6)	☐ Sep 20 (M9)	☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4)	☐ Jul 20 (M7)	☐ Oct 20 (M10)	☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2015 through 01 / 31 / 2015

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

Type or Print Name of Treasurer Mario Rizzo

Signature of Treasurer *Mario Rizzo* ***[Electronically Filed]*** Date 02 / 13 / 2015

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

Office Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: 01 / 01 / 2015 To: 01 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		36833.08
(b) Cash on Hand at Beginning of Reporting Period	36833.08	
(c) Total Receipts (from Line 19)	20313.39	20313.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	57146.47	57146.47
7. Total Disbursements (from Line 31)	28150.48	28150.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28995.99	28995.99
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

FEC **Form 3X** (Rev. 06/2004)

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: M M 01 / D D 01 / Y Y Y Y 2015 To: M M 01 / D D 31 / Y Y Y Y 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1911.53	1911.53
(ii) Unitemized	18401.86	18401.86
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	20313.39	20313.39
(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) ▶	20313.39	20313.39
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	20313.39	20313.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	20313.39	20313.39

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	150.48	150.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	150.48	150.48
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	28000.00	28000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	28150.48	28150.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	28150.48	28150.48

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	20313.39	20313.39
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20313.39	20313.39
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	150.48	150.48
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	150.48	150.48

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)
[X] 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)
James A Haskins

Mailing Address 511 Oak Knoll Road

City: Barrington
State: IL
Zip Code: 60010

FEC ID number of contributing federal political committee.: C

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

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 200.76

Date of Receipt: 01 / 23 / 2015
Transaction ID : A2015-62924

Amount of Each Receipt this Period: 100.38

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: EVP-PRD-Regional Product

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 275.38

Date of Receipt: 01 / 23 / 2015
Transaction ID : A2015-62707

Amount of Each Receipt this Period: 137.69

C. Full Name (Last, First, Middle Initial)
SUSAN L LEES

Mailing Address 1950 Merritt Lane

City: Lake Forest
State: IL
Zip Code: 60045

FEC ID number of contributing federal political committee.: C

Name of Employer: Allstate Insurance Company
Occupation: EVP-LGL-Gen'l Counsel & C

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 219.24

Date of Receipt: 01 / 23 / 2015
Transaction ID : A2015-62652

Amount of Each Receipt this Period: 109.62

SUBTOTAL of Receipts This Page (optional) ▶ 347.69

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **SA11AI**
Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 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)
Katherine A Mabe

Mailing Address 2750 Commons Drive

City: Glenview
State: IL
Zip Code: 60026

FEC ID number of contributing federal political committee. C

Name of Employer: Allstate Insurance Company
Occupation: EVP-B2B-President Busine

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 223.84

Date of Receipt: 01 / 23 / 2015
Transaction ID : A2015-62916

Amount of Each Receipt this Period: 111.92

B. Full Name (Last, First, Middle Initial)
BRIAN J SAVAGE

Mailing Address 1506 Old Peterson Rd.

City: Libertyville
State: IL
Zip Code: 60048

FEC ID number of contributing federal political committee. C

Name of Employer: Allstate Insurance Company
Occupation: VP-ST-Continuous Improvem

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 01 / 06 / 2015
Transaction ID : A2015-6016

Amount of Each Receipt this Period: 225.00

C. Full Name (Last, First, Middle Initial)
STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City: WHEATON
State: IL
Zip Code: 60189

FEC ID number of contributing federal political committee. C

Name of Employer: Allstate Insurance Company
Occupation: EVP-FSS-Chief Financial O

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 346.16

Date of Receipt: 01 / 23 / 2015
Transaction ID : A2015-62771

Amount of Each Receipt this Period: 173.08

SUBTOTAL of Receipts This Page (optional) ▶ 510.00

TOTAL This Period (last page this line 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)
[X] 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 C VERNEY

Mailing Address 37144 FOX HILL DR

City: WADSWORTH
State: IL
Zip Code: 60083

FEC ID number of contributing federal political committee.: C

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

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 292.30

Date of Receipt: 01 / 23 / 2015
Transaction ID : A2015-62680

Amount of Each Receipt this Period: 146.15

B. Full Name (Last, First, Middle Initial)
Mary P Weiss

Mailing Address 5209 Westwood Drive

City: Bethesda
State: MD
Zip Code: 20816

FEC ID number of contributing federal political committee.: C

Name of Employer: Allstate Insurance Company
Occupation: VP-LGL-Legislative & Regu

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 384.62

Date of Receipt: 01 / 23 / 2015
Transaction ID : A2015-62932

Amount of Each Receipt this Period: 192.31

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

Mailing Address 2024 N. MOHAWK

City: CHICAGO
State: IL
Zip Code: 60614

FEC ID number of contributing federal political committee.: C

Name of Employer: Allstate Insurance Company
Occupation: CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 265.38

Date of Receipt: 01 / 09 / 2015
Transaction ID : A2015-22821

Amount of Each Receipt this Period: 265.38

SUBTOTAL of Receipts This Page (optional) ▶ 603.84

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 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): THOMAS J WILSON
Mailing Address: 2024 N. MOHAWK
City: CHICAGO State: IL Zip Code: 60614
FEC ID number of contributing federal political committee: C
Name of Employer: Allstate Insurance Company
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 530.76
Date of Receipt: 01 / 23 / 2015
Transaction ID : A2015-62835
Amount of Each Receipt this Period: 265.38

B.
Full Name (Last, First, Middle Initial): Matthew E Winter
Mailing Address: 70 Ferncliff Drive
City: West Hartford State: CT Zip Code: 06117
FEC ID number of contributing federal political committee: C
Name of Employer: Allstate Insurance Company
Occupation: EVP-APL-Pres. Allstate Pe
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 365.77
Date of Receipt: 01 / 23 / 2015
Transaction ID : A2015-62913
Amount of Each Receipt this Period: 184.62

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

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

TOTAL This Period (last page this line number only) ▶ 1911.53

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial): Defend America PAC
Mailing Address: 6610 Columbia Pike
City: Annandale State: VA Zip Code: 22003
Purpose of Disbursement: Contribution
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) ▼ Not Applicable
Date of Disbursement: M M 01 / D D 27 / Y Y Y Y 2015
Transaction ID : B543986
Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial): Reaching For A Brighter America PAC (RBA PAC)
Mailing Address: P.O. Box 15709
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contribution
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2014 ☐ Primary ☐ General ☒ Other (specify) ▼ Not Applicable
Date of Disbursement: M M 01 / D D 08 / Y Y Y Y 2015
Transaction ID : B537763
Amount of Each Disbursement this Period: -2000.00
Voided: Original check dated 10/23/14

C. Full Name (Last, First, Middle Initial): Reaching For A Brighter America PAC (RBA PAC)
Mailing Address: P. O. Box 15709
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contribution
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) ▼ Not Applicable
Date of Disbursement: M M 01 / D D 15 / Y Y Y Y 2015
Transaction ID : B543596
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial): Bill Foster for Congress
Mailing Address: 499 S Capitol Street SW Suite 422
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: William G Foster
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 11
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 01/29/2015
Transaction ID : B544216
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Blaine for Congress
Mailing Address: 217 Third Street SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Blaine Luetkemeyer
Office Sought: ☒ House ☐ Senate ☐ President
State: MO District: 03
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 01/27/2015
Transaction ID : B543985
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Friends of Sherrod Brown
Mailing Address: 328 Massachusetts Ave. NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Sherrod Brown
Office Sought: ☐ House ☒ Senate ☐ President
State: OH District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 01/29/2015
Transaction ID : B544222
Amount of Each Disbursement this Period: 2000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial): Tim Scott for Senate
Mailing Address: 499 S. Capitol St. SW Suite 420
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Tim Scott
Office Sought: ☐ House ☒ Senate ☐ President
State: SC District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 01/29/2015
Transaction ID : B544217
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Rounds for Senate 2014 General Debt Retirement
Mailing Address: PO Box 250
City: Pierre State: SD Zip Code: 57501
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Mike Rounds
Office Sought: ☐ House ☒ Senate ☐ President
State: SD District:
Disbursement For: 2014 ☐ Primary ☐ General ☒ Other (specify) Debt Ret General
Date of Disbursement: 01/29/2015
Transaction ID : B544213
Amount of Each Disbursement this Period: 1500.00

C. Full Name (Last, First, Middle Initial): Democratic Senatorial Campaign Committee
Mailing Address: 120 Maryland Ave. NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) Not Applicable
Date of Disbursement: 01/29/2015
Transaction ID : B544219
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 9000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Republican Main Street Partnership PAC

Mailing Address 1220 L Street NW Suite 100-263

City: Washington | State: DC | Zip Code: 20005

Purpose of Disbursement: Contribution

Candidate Name:

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2015
☐ Primary ☐ General
☒ Other (specify) ▼ Not Applicable

Date of Disbursement: 01 / 29 / 2015

Transaction ID : B544211

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
National Republican Senatorial Committee

Mailing Address 425 2nd St NE

City: Washington | State: DC | Zip Code: 20002

Purpose of Disbursement: Contribution

Candidate Name:

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2015
☐ Primary ☐ General
☒ Other (specify) ▼ Not Applicable

Date of Disbursement: 01 / 29 / 2015

Transaction ID : B544215

Amount of Each Disbursement this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Wild and Wonderful PAC

Mailing Address 1006 Pendleton Street

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement: Contribution

Candidate Name:

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼ Not Applicable

Date of Disbursement: 01 / 15 / 2015

Transaction ID : B540407

Amount of Each Disbursement this Period: -1500.00

Voided: Original check dated 12/11/14

SUBTOTAL of Disbursements This Page (optional) ▶ 8500.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.
Full Name (Last, First, Middle Initial): Wild and Wonderful PAC
Mailing Address: 1006 Pendleton Street
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) ▼ Not Applicable
Date of Disbursement: 01 / 16 / 2015
Transaction ID : B543666
Amount of Each Disbursement this Period: 1500.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 1500.00

TOTAL This Period (last page this line number only) ▶ 28000.00