

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 04 01 2010 through 04 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Steven C. Verney

Signature of Treasurer Electronically Filed by Steven C. Verney Date 05 18 2010

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 **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		37795.26
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	23662.33									
(c) Total Receipts (from Line 19)	27178.01	112995.35								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	50840.34	150790.61								
7. Total Disbursements (from Line 31)	17860.53	117810.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	32979.81	32979.81								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	19037.30	40413.43
(ii) Unitemized	8140.45	68080.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)	27177.75	108494.31
(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)	27177.75	108494.31
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	4500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.26	1.04
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))	27178.01	112995.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	27178.01	112995.35

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) 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.....	110.53	510.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	110.53	510.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	79500.00
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.....	5250.00	37800.00
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))..	17860.53	117810.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17860.53	117810.80

DETAILED SUMMARY PAGE
of Disbursements

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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)	27177.75	108494.31
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27177.75	108494.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	110.53	510.80
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	110.53	510.80

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 156
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JONES G ADUKEH		Date of Receipt
	Mailing Address 1226 RIDGEWOOD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 0 9 / 2 0 1 0
	City	State	Zip Code
	LAKE VILLA	IL	60046
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-893662
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 ▼ 232.20	<input type="text"/> 33.36

B.	Full Name (Last, First, Middle Initial) JONES G ADUKEH		Date of Receipt
	Mailing Address 1226 RIDGEWOOD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 2 3 / 2 0 1 0
	City	State	Zip Code
	LAKE VILLA	IL	60046
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-974700
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 ▼ 265.56	<input type="text"/> 33.36

C.	Full Name (Last, First, Middle Initial) LORA L ADUKEH		Date of Receipt
	Mailing Address 1226 RIDGEWOOD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 0 9 / 2 0 1 0
	City	State	Zip Code
	LAKE VILLA	IL	60046
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-893718
Name of Employer Allstate Insurance Company		Occupation Sr. Sales 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 ▼ 234.78	<input type="text"/> 34.66

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 101.38
TOTAL This Period (last page this line number only)	<input type="text"/>

A. 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.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 156
	(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) LORAL ADUKEH	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 1226 RIDGEWOOD LANE	Transaction ID: A2010-974755
	City State Zip Code LAKE VILLA IL 60046	Amount of Each Receipt this Period 34.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Sr. Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 269.44	

B.	Full Name (Last, First, Middle Initial) ERIKA S AHERN	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 16 Sea Winds Lane East	Transaction ID: A2010-974386
	City State Zip Code Ponte Vedra Beach FL 32082	Amount of Each Receipt this Period 28.41
	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 ▼ 222.92	

C.	Full Name (Last, First, Middle Initial) DAVID L ALLEN	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 4372 Duckhorn Drive	Transaction ID: A2010-893385
	City State Zip Code Moon Township PA 15108	Amount of Each Receipt this Period 31.71
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Territorial Sales Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 217.69	

SUBTOTAL of Receipts This Page (optional)	▶	94.78
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: PAGE 9 / 156

(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 L ALLEN

Mailing Address 4372 Duckhorn Drive

City State Zip Code
Moon Township PA 15108

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

Name of Employer Occupation
Allstate Insurance Company Territorial Sales Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 249.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	0

Transaction ID: A2010-974424

Amount of Each Receipt this Period

31.71

B.

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

Mailing Address 438 MITCHELL DRIVE

City State Zip Code
GRAYS LAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company VP Enterprise Infrastruct

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 533.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	1	0

Transaction ID: A2010-893336

Amount of Each Receipt this Period

78.78

C.

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

Mailing Address 438 MITCHELL DRIVE

City State Zip Code
GRAYS LAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company VP Enterprise Infrastruct

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 612.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	0

Transaction ID: A2010-974375

Amount of Each Receipt this Period

78.78

SUBTOTAL of Receipts This Page (optional) ▶

189.27

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 156
(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)
CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE, N

City JACKSONVILLE State FL Zip Code 32224

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

Name of Employer Allstate Insurance Company Occupation AVP-Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	1	0

Transaction ID: A2010-893428

Amount of Each Receipt this Period
33.22

B.

Full Name (Last, First, Middle Initial)
CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE, N

City JACKSONVILLE State FL Zip Code 32224

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

Name of Employer Allstate Insurance Company Occupation AVP-Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

Transaction ID: A2010-974467

Amount of Each Receipt this Period
33.22

C.

Full Name (Last, First, Middle Initial)
ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse, Unit 508

City Chicago State IL Zip Code 60626

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 ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

Transaction ID: A2010-974671

Amount of Each Receipt this Period
28.54

SUBTOTAL of Receipts This Page (optional) ► **94.98**

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

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

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

FOR LINE NUMBER: PAGE 11 / 156
(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)
GREGORY P BALDWIN

Mailing Address 2 Saddle Ridge 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 CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.24

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893623

Amount of Each Receipt this Period
39.16

B. Full Name (Last, First, Middle Initial)
GREGORY P BALDWIN

Mailing Address 2 Saddle Ridge 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 CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.40

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974661

Amount of Each Receipt this Period
39.16

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

Mailing Address 25 Blue Heron Way

City State Zip Code
Skillman NJ 08558

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 ▼ 249.65

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893403

Amount of Each Receipt this Period
35.87

SUBTOTAL of Receipts This Page (optional) ► **114.19**

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 12 / 156
(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 P BALLINGER

Mailing Address 25 Blue Heron Way

City State Zip Code
Skillman NJ 08558

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

Name of Employer Allstate Insurance Company Occupation FVP President New Jersey

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 285.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

Transaction ID: A2010-974442

Amount of Each Receipt this Period
35.87

B. Full Name (Last, First, Middle Initial)
DARRYL L BALTIMORE

Mailing Address 259 MAY 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 AVP Allstate Financial -

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 370.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	1	0

Transaction ID: A2010-893751

Amount of Each Receipt this Period
53.35

C. Full Name (Last, First, Middle Initial)
DARRYL L BALTIMORE

Mailing Address 259 MAY 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 AVP Allstate Financial -

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 423.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

Transaction ID: A2010-974788

Amount of Each Receipt this Period
53.35

SUBTOTAL of Receipts This Page (optional) ► **142.57**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <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) PHILLIP W BANET	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 4589 JADE LANE	Transaction ID: A2010-893457
	City State Zip Code HOFFMAN ESTATES IL 60192	Amount of Each Receipt this Period 35.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 244.10	

B.	Full Name (Last, First, Middle Initial) PHILLIP W BANET	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 4589 JADE LANE	Transaction ID: A2010-974496
	City State Zip Code HOFFMAN ESTATES IL 60192	Amount of Each Receipt this Period 35.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 279.56	

C.	Full Name (Last, First, Middle Initial) ROBERT H BARGE III, III	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 2222 LOCH WAY	Transaction ID: A2010-893730
	City State Zip Code EL DORADO HILLS CA 95762	Amount of Each Receipt this Period 72.82
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Field Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 503.18	

SUBTOTAL of Receipts This Page (optional)	▶	143.74
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 14 / 156
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT H BARGE III, 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 ▼ 576.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974767

Amount of Each Receipt this Period
72.82

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

Mailing Address 1402 N. Illinois Avenue

City State Zip Code
Arlington Heights IL 60004

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 ▼ 216.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974548

Amount of Each Receipt this Period
27.57

C. Full Name (Last, First, Middle Initial)
WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

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 Planning Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.75

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893585

Amount of Each Receipt this Period
33.01

SUBTOTAL of Receipts This Page (optional) ► **133.40**

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 15 / 156

(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)
WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code
NAPERVILLE IL 60565

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 ▼ 262.76

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974623

Amount of Each Receipt this Period

33.01

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 Occupation
Allstate Insurance Company Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 282.80

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893376

Amount of Each Receipt this Period

40.40

C.

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 Occupation
Allstate Insurance Company Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 323.20

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974415

Amount of Each Receipt this Period

40.40

SUBTOTAL of Receipts This Page (optional) ▶

113.81

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 16 / 156
(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 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 ▼ 279.06

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893664

Amount of Each Receipt this Period
40.54

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 ▼ 319.60

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974702

Amount of Each Receipt this Period
40.54

C.

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 Allstate Insurance Company Occupation Vice President Investor R

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 444.40

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893653

Amount of Each Receipt this Period
64.20

SUBTOTAL of Receipts This Page (optional) ► **145.28**

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 17 / 156
(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 Allstate Insurance Company Occupation Vice President Investor R

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 508.60

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974691

Amount of Each Receipt this Period
64.20

B.

Full Name (Last, First, Middle Initial)
DOUGLAS L BORG

Mailing Address 2160 Red Setter Road

City State Zip Code
Rocklin CA 95765

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

Name of Employer Allstate Insurance Company Occupation Financial Sales Consultan

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.81

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893728

Amount of Each Receipt this Period
32.83

C.

Full Name (Last, First, Middle Initial)
DOUGLAS L BORG

Mailing Address 2160 Red Setter Road

City State Zip Code
Rocklin CA 95765

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

Name of Employer Allstate Insurance Company Occupation Financial Sales Consultan

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.64

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974765

Amount of Each Receipt this Period
32.83

SUBTOTAL of Receipts This Page (optional) ► **129.86**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <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 B BOYLE	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 1063 CHERRY STREET	Transaction ID: A2010-893406
	City State Zip Code WINNETKA IL 60093	Amount of Each Receipt this Period 78.83
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Info Techn Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 545.65	

B.	Full Name (Last, First, Middle Initial) MICHAEL B BOYLE	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 1063 CHERRY STREET	Transaction ID: A2010-974445
	City State Zip Code WINNETKA IL 60093	Amount of Each Receipt this Period 78.83
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Info Techn Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 624.48	

C.	Full Name (Last, First, Middle Initial) LONDON B BRADLEY	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 2411 Grey Eagle Bay	Transaction ID: A2010-893699
	City State Zip Code woodbury MN 55129	Amount of Each Receipt this Period 31.93
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Territorial Sales Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.39	

SUBTOTAL of Receipts This Page (optional)	▶	189.59
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 19 / 156

(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 2411 Grey Eagle Bay

City State Zip Code
woodbury MN 55129

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

Name of Employer Occupation
Allstate Insurance Company Territorial Sales Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974736

Amount of Each Receipt this Period

31.93

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 Occupation
Allstate Insurance Company AVP PCCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 306.86

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893519

Amount of Each Receipt this Period

44.94

C.

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

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Occupation
Allstate Insurance Company AVP PCCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 351.80

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974557

Amount of Each Receipt this Period

44.94

SUBTOTAL of Receipts This Page (optional)

121.81

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 20 / 156
(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)
LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code
FRANKLIN TN 37064

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) ▼ 255.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	1	0

Transaction ID: A2010-893419

Amount of Each Receipt this Period
36.96

B. Full Name (Last, First, Middle Initial)
LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code
FRANKLIN TN 37064

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) ▼ 292.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

Transaction ID: A2010-974458

Amount of Each Receipt this Period
36.96

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 & CIO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1310.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	1	0

Transaction ID: A2010-893427

Amount of Each Receipt this Period
188.46

SUBTOTAL of Receipts This Page (optional) ► **262.38**

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 21 / 156
(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
 Date of Receipt
MM / DD / YYYY
04 / 23 / 2010
 Transaction ID: A2010-974466
 Amount of Each Receipt this Period
188.46
 FEC ID number of contributing federal political committee. C
 Name of Employer Allstate Insurance Company Occupation SVP & CIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1498.68

B. Full Name (Last, First, Middle Initial)
ANNE MARIE L BRUNNER
 Mailing Address 2514 SOUTH WESLEY AVE
 City State Zip Code
BERWYN IL 60402
 Date of Receipt
MM / DD / YYYY
04 / 09 / 2010
 Transaction ID: A2010-893515
 Amount of Each Receipt this Period
37.02
 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 ▼ 256.26

C. Full Name (Last, First, Middle Initial)
ANNE MARIE L BRUNNER
 Mailing Address 2514 SOUTH WESLEY AVE
 City State Zip Code
BERWYN IL 60402
 Date of Receipt
MM / DD / YYYY
04 / 23 / 2010
 Transaction ID: A2010-974553
 Amount of Each Receipt this Period
37.02
 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 ▼ 293.28

SUBTOTAL of Receipts This Page (optional) ► 262.50
TOTAL This Period (last page this line 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 / 156
(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 ▼ 227.86

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893654
 Amount of Each Receipt this Period: 33.10

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 ▼ 260.96

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974692
 Amount of Each Receipt this Period: 33.10

C.

Full Name (Last, First, Middle Initial)
JEFFREY E BURKE

Mailing Address 601 North Pines Trail

City Parker State CO Zip Code 80138

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

Name of Employer Allstate Insurance Company Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.27

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893756
 Amount of Each Receipt this Period: 43.25

SUBTOTAL of Receipts This Page (optional) ► 109.45

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 23 / 156

(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 E BURKE

Mailing Address 601 North Pines Trail

City State Zip Code
Parker CO 80138

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

Name of Employer Occupation
Allstate Insurance Company Regional Sales Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 344.52

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974793

Amount of Each Receipt this Period

43.25

B.

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

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

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

Name of Employer Occupation
Allstate Insurance Company AVP & Tax Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 630.70

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893326

Amount of Each Receipt this Period

90.62

C.

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

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

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

Name of Employer Occupation
Allstate Insurance Company AVP & Tax Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 721.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974365

Amount of Each Receipt this Period

90.62

SUBTOTAL of Receipts This Page (optional)

224.49

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 24 / 156
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
DANIEL C BUTLER III, 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 Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 412.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893426

Amount of Each Receipt this Period
62.32

B.

Full Name (Last, First, Middle Initial)
DANIEL C BUTLER III, 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 Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 474.64

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974465

Amount of Each Receipt this Period
62.32

C.

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

Mailing Address 4121 109TH STREET

City State Zip Code
PLEASANT PRAIRI WI 53158

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 ▼ 562.13

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893648

Amount of Each Receipt this Period
81.35

SUBTOTAL of Receipts This Page (optional) ► 205.99

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <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) ALICE M BYRNE	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 4121 109TH STREET	Transaction ID: A2010-974686
	City State Zip Code PLEASANT PRAIRI WI 53158	Amount of Each Receipt this Period 81.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Field Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 643.48	

B.	Full Name (Last, First, Middle Initial) SCOTT M CHRISTENSEN	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 20713 LEXINGTON LANE	Transaction ID: A2010-893575
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 42.67
	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 ▼ 286.05	

C.	Full Name (Last, First, Middle Initial) SCOTT M CHRISTENSEN	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 20713 LEXINGTON LANE	Transaction ID: A2010-974613
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 42.67
	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 ▼ 328.72	

SUBTOTAL of Receipts This Page (optional)	▶	166.69
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 26 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 2907 GLENARYE DR

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Occupation
Allstate Insurance Company Senior State Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.48

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974641

Amount of Each Receipt this Period

26.19

B.

Full Name (Last, First, Middle Initial)
CHRISTOPHER W CLAY

Mailing Address 8875 SILVERBERRY AVENUE

City State Zip Code
ELK GROVE CA 95624

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 ▼ 202.47

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893753

Amount of Each Receipt this Period

29.81

C.

Full Name (Last, First, Middle Initial)
CHRISTOPHER W CLAY

Mailing Address 8875 SILVERBERRY AVENUE

City State Zip Code
ELK GROVE CA 95624

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 ▼ 232.28

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974790

Amount of Each Receipt this Period

29.81

SUBTOTAL of Receipts This Page (optional)

85.81

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 27 / 156
(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)
MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS IL 60558

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

Name of Employer Allstate Insurance Company Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 258.55

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893459

Amount of Each Receipt this Period
36.92

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

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS IL 60558

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

Name of Employer Allstate Insurance Company Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.47

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974498

Amount of Each Receipt this Period
36.92

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

Mailing Address 4667 TAMWORTH DR

City State Zip Code
PALM HARBOR FL 34685

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

Name of Employer Allstate Insurance Company Occupation Regional Marketing Manage

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.50

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893601

Amount of Each Receipt this Period
30.38

SUBTOTAL of Receipts This Page (optional) ► **104.22**

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 28 / 156
(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)
DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
PALM HARBOR FL 34685

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

Name of Employer Allstate Insurance Company Occupation Regional Marketing Manage

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.88

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974639

Amount of Each Receipt this Period
30.38

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

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 239.55

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893560

Amount of Each Receipt this Period
34.69

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

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.24

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974598

Amount of Each Receipt this Period
34.69

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 29 / 156
(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 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 AVP Ast General Counsel &

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 306.93

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893508

Amount of Each Receipt this Period
44.71

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 AVP Ast General Counsel &

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 351.64

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974546

Amount of Each Receipt this Period
44.71

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 ▼ 220.79

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893565

Amount of Each Receipt this Period
32.25

SUBTOTAL of Receipts This Page (optional) ► **121.67**

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 30 / 156

(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 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 ▼ 253.04

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974603

Amount of Each Receipt this Period

32.25

B.

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

Mailing Address 218 S KASPAR

City State Zip Code
ARLINGTON HGTS. IL 60005

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 537.71

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893465

Amount of Each Receipt this Period

78.33

C.

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

Mailing Address 218 S KASPAR

City State Zip Code
ARLINGTON HGTS. IL 60005

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 616.04

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974504

Amount of Each Receipt this Period

78.33

SUBTOTAL of Receipts This Page (optional)

188.91

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 31 / 156
(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, Jr.
Mailing Address 905 Chalet Court

City State Zip Code
Colleyville TX 76034

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.18

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893388
Amount of Each Receipt this Period: 72.26

B. Full Name (Last, First, Middle Initial)
RICHARD C CRIST JR, Jr.
Mailing Address 905 Chalet Court

City State Zip Code
Colleyville TX 76034

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 572.44

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974427
Amount of Each Receipt this Period: 72.26

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 AVP PCCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 319.34

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893375
Amount of Each Receipt this Period: 47.14

SUBTOTAL of Receipts This Page (optional) ► 191.66

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 32 / 156
(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 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 AVP PCCSO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 366.48

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974414

Amount of Each Receipt this Period
47.14

B.

Full Name (Last, First, Middle Initial)
ROBERT W DANIELS

Mailing Address 1020 Pleasant Street, #1

City State Zip Code
Oak Park IL 60302

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 ▼ 257.87

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893415

Amount of Each Receipt this Period
37.05

C.

Full Name (Last, First, Middle Initial)
ROBERT W DANIELS

Mailing Address 1020 Pleasant Street, #1

City State Zip Code
Oak Park IL 60302

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 ▼ 294.92

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974454

Amount of Each Receipt this Period
37.05

SUBTOTAL of Receipts This Page (optional) ► 121.24

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 33 / 156
(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)
RANDAL S DECOURSEY

Mailing Address 1954 Oakwood 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 Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.37

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893509

Amount of Each Receipt this Period
34.71

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

Mailing Address 1954 Oakwood 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 Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 271.08

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974547

Amount of Each Receipt this Period
34.71

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 Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 266.70

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893447

Amount of Each Receipt this Period
38.74

SUBTOTAL of Receipts This Page (optional) ► **108.16**

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 34 / 156
(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 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 Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974486

Amount of Each Receipt this Period
38.74

B.

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

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP-Product Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 382.13

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893619

Amount of Each Receipt this Period
54.59

C.

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

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP-Product Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 436.72

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974657

Amount of Each Receipt this Period
54.59

SUBTOTAL of Receipts This Page (optional) ► **147.92**

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 35 / 156
(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)
LORI A DESCH

Mailing Address 12923 Freemont Peak Lane

City State Zip Code
Humble TX 77346

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 ▼ 291.91

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893439

Amount of Each Receipt this Period
42.61

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

Mailing Address 12923 Freemont Peak Lane

City State Zip Code
Humble TX 77346

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 ▼ 334.52

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974478

Amount of Each Receipt this Period
42.61

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-Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 407.18

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893593

Amount of Each Receipt this Period
58.50

SUBTOTAL of Receipts This Page (optional) ► 143.72

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 36 / 156
	(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) 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 0 4 / 2 3 / 2 0 1 0
	City	State	Zip Code
	LONG GROVE	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-974631
Name of Employer Allstate Insurance Company		Occupation AVP-Product	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 ▼ 465.68	<input type="text"/> 58.50

B.	Full Name (Last, First, Middle Initial) PATRICIA B DREXLER		Date of Receipt
	Mailing Address 472 W. SYCAMORE ST.		<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 4 / 2 3 / 2 0 1 0
	City	State	Zip Code
	VERNON HILLS	IL	60061
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-974523
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 ▼ 222.24	<input type="text"/> 28.32

C.	Full Name (Last, First, Middle Initial) TIMOTHY R DUGAN		Date of Receipt
	Mailing Address 3220 SANDY 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 0 4 / 0 9 / 2 0 1 0
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-893704
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 ▼ 225.29	<input type="text"/> 32.55

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 119.37
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 37 / 156
(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)
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 Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 257.84

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974741

Amount of Each Receipt this Period

32.55

B.

Full Name (Last, First, Middle Initial)
MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City State Zip Code
ROSCOE IL 61073

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

Name of Employer Occupation
Allstate Insurance Company Allstate Financial Senior

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.88

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974611

Amount of Each Receipt this Period

25.80

C.

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

Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60005

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

Name of Employer Occupation
Allstate Insurance Company Senior Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.33

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893599

Amount of Each Receipt this Period

30.27

SUBTOTAL of Receipts This Page (optional)

88.62

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 38 / 156
(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)
DANIEL P DURBIN

Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60005

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.60

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974637
Amount of Each Receipt this Period: 30.27

B. Full Name (Last, First, Middle Initial)
MATTHEW S EASLEY

Mailing Address 1327 N Illinois Avenue

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Vice President Product AF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.53

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893491
Amount of Each Receipt this Period: 34.27

C. Full Name (Last, First, Middle Initial)
MATTHEW S EASLEY

Mailing Address 1327 N Illinois Avenue

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Vice President Product AF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.80

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974529
Amount of Each Receipt this Period: 34.27

SUBTOTAL of Receipts This Page (optional) ► 98.81

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 39 / 156

(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 C EASON

Mailing Address 3077 EAST LAKE RD

City State Zip Code
MCDONOUGH GA 30252

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

Name of Employer Occupation
Allstate Insurance Company Field Product Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 227.80

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974471

Amount of Each Receipt this Period

28.90

B.

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

Mailing Address 10323 TRUMBULL AVE

City State Zip Code
CHICAGO IL 60655

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

Name of Employer Occupation
Allstate Insurance Company AVP Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 267.44

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893607

Amount of Each Receipt this Period

38.64

C.

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

Mailing Address 10323 TRUMBULL AVE

City State Zip Code
CHICAGO IL 60655

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

Name of Employer Occupation
Allstate Insurance Company AVP Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 306.08

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974645

Amount of Each Receipt this Period

38.64

SUBTOTAL of Receipts This Page (optional)

106.18

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 40 / 156
(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 L ESCOBAR

Mailing Address 660 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

Name of Employer Allstate Insurance Company Occupation AVP Finance Innovation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 376.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	1	0

Transaction ID: A2010-893339

Amount of Each Receipt this Period
53.75

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

Mailing Address 660 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

Name of Employer Allstate Insurance Company Occupation AVP Finance Innovation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 430.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

Transaction ID: A2010-974378

Amount of Each Receipt this Period
53.75

C. 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 Allstate Insurance Company Occupation Unclassified Sr Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 229.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	1	0

Transaction ID: A2010-893527

Amount of Each Receipt this Period
33.03

SUBTOTAL of Receipts This Page (optional) ► **140.53**

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: PAGE 41 / 156

(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 ▼ 262.92

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974565

Amount of Each Receipt this Period

33.03

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 ▼ 307.37

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893373

Amount of Each Receipt this Period

44.35

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 ▼ 351.72

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974412

Amount of Each Receipt this Period

44.35

SUBTOTAL of Receipts This Page (optional)

121.73

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 42 / 156
(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)
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 Marketing Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893660

Amount of Each Receipt this Period
39.76

B. 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 Marketing Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 314.96

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974698

Amount of Each Receipt this Period
39.76

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 ▼ 344.82

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893523

Amount of Each Receipt this Period
49.26

SUBTOTAL of Receipts This Page (optional) ► 128.78

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:	PAGE 43 / 156
	(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) GORDON S FALKNOR	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 703 E CHERRY LN	Transaction ID: A2010-974561
	City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 49.26
	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 ▼ 394.08

B.	Full Name (Last, First, Middle Initial) CAROLYN A FILIPOVIC	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 918 JUNIPER ROAD	Transaction ID: A2010-974675
	City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 27.76
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior Regional Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.44

C.	Full Name (Last, First, Middle Initial) STEVEN FINE	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 40375 N. SEA EAGLE CT	Transaction ID: A2010-974419
	City State Zip Code ANTIOCH IL 60002	Amount of Each Receipt this Period 26.03
	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 ▼ 206.20

SUBTOTAL of Receipts This Page (optional)	103.05
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 44 / 156

(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)
LISA J FLANARY

Mailing Address 1007 Harris Road

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company AVP Distribution Channel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 234.51

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893645

Amount of Each Receipt this Period

34.53

B.

Full Name (Last, First, Middle Initial)
LISA J FLANARY

Mailing Address 1007 Harris Road

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company AVP Distribution Channel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 269.04

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974683

Amount of Each Receipt this Period

34.53

C.

Full Name (Last, First, Middle Initial)
KELLY F FOGARTY

Mailing Address 613 REX

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Occupation
Allstate Insurance Company AVP State Team

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 281.45

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893518

Amount of Each Receipt this Period

41.11

SUBTOTAL of Receipts This Page (optional)

110.17

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 45 / 156
	(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) 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 0 4 / 2 3 / 2 0 1 0
	City	State	Zip Code
	ELMHURST	IL	60126
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-974556
Name of Employer Allstate Insurance Company		Occupation AVP State Team	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 ▼ 322.56	<input type="text"/> 41.11

B.	Full Name (Last, First, Middle Initial) ANGELA FUSCO		Date of Receipt
	Mailing Address 22255 MASHIE 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 4 / 0 9 / 2 0 1 0
	City	State	Zip Code
	IVANHOE	IL	60060
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-893390
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 ▼ 238.96	<input type="text"/> 35.28

C.	Full Name (Last, First, Middle Initial) ANGELA FUSCO		Date of Receipt
	Mailing Address 22255 MASHIE 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 4 / 2 3 / 2 0 1 0
	City	State	Zip Code
	IVANHOE	IL	60060
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-974429
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 ▼ 274.24	<input type="text"/> 35.28

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 111.67
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 46 / 156
	<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) VINCENT A FUSCO		Date of Receipt MM / DD / YYYY 04 / 23 / 2010	
	Mailing Address 6 SUGAR MAPLE COURT		Transaction ID: A2010-974373	
	City	State	Zip Code	Amount of Each Receipt this Period
	DIX HILLS	NY	11746	26.87
	FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation VP-Agency Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.44		

B.	Full Name (Last, First, Middle Initial) BONNIE S GILL		Date of Receipt MM / DD / YYYY 04 / 09 / 2010	
	Mailing Address 1570 EDGEFIELD LANE		Transaction ID: A2010-893691	
	City	State	Zip Code	Amount of Each Receipt this Period
	HOFFMAN ESTATES	IL	60169	31.76
	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 ▼ 222.32		

C.	Full Name (Last, First, Middle Initial) BONNIE S GILL		Date of Receipt MM / DD / YYYY 04 / 23 / 2010	
	Mailing Address 1570 EDGEFIELD LANE		Transaction ID: A2010-974728	
	City	State	Zip Code	Amount of Each Receipt this Period
	HOFFMAN ESTATES	IL	60169	31.76
	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 ▼ 254.08		

SUBTOTAL of Receipts This Page (optional)	▶	90.39
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 47 / 156
(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) JOAN GILMORE		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 656 S BUCKINGHAM CT		Transaction ID: A2010-893340
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.36
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.16	

B.

Full Name (Last, First, Middle Initial) JOAN GILMORE		Date of Receipt MM / DD / YYYY 04 / 23 / 2010
Mailing Address 656 S BUCKINGHAM CT		Transaction ID: A2010-974379
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.36
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.52	

C.

Full Name (Last, First, Middle Initial) ANN A GOULD		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 4071 NEWPORT LANE		Transaction ID: A2010-893734
City ARLINGTON HTS	State IL	Zip Code 60004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.95
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 ▼ 235.65	

SUBTOTAL of Receipts This Page (optional)	116.67
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 48 / 156
(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)
ANN A GOULD
 Mailing Address 4071 NEWPORT LANE
 City State Zip Code
 ARLINGTON HTS IL 60004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 3 / 2 0 1 0
Transaction ID: A2010-974771
 Amount of Each Receipt this Period
 33.95
 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 ▼ 269.60

B. Full Name (Last, First, Middle Initial)
PAMELA P GRAY
 Mailing Address 50 E. BELLEVUE PL. #2402
 City State Zip Code
 CHICAGO IL 60611
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 3 / 2 0 1 0
Transaction ID: A2010-974708
 Amount of Each Receipt this Period
 27.93
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior Marketing Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.20

C. Full Name (Last, First, Middle Initial)
JUDITH P GREFFIN
 Mailing Address 338 North Kenilworth
 City State Zip Code
 OAK PARK IL 60302
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 9 / 2 0 1 0
Transaction ID: A2010-893454
 Amount of Each Receipt this Period
 58.85
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP & Chief Investment Of
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 389.99

SUBTOTAL of Receipts This Page (optional) ► 120.73
TOTAL This Period (last page this line 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 / 156

(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)
JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City State Zip Code
OAK PARK IL 60302

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

Name of Employer Occupation
Allstate Insurance Company SVP & Chief Investment Of

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 448.84

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974493

Amount of Each Receipt this Period

58.85

B.

Full Name (Last, First, Middle Initial)
ANN M GROSS

Mailing Address 91 STABLE WAY

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Occupation
Allstate Insurance Company Senior Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.20

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974389

Amount of Each Receipt this Period

25.40

C.

Full Name (Last, First, Middle Initial)
GREGORY J GUIDOS

Mailing Address 417 Adams Avenue

City State Zip Code
Glencoe IL 60022

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

Name of Employer Occupation
Allstate Insurance Company Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.92

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974673

Amount of Each Receipt this Period

26.50

SUBTOTAL of Receipts This Page (optional)

110.75

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 50 / 156

(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 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 Occupation
Allstate Insurance Company Line of Busn Dir Auto-Sma

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 213.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974772

Amount of Each Receipt this Period

26.91

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 Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 249.27

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893700

Amount of Each Receipt this Period

36.41

C.

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 Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974737

Amount of Each Receipt this Period

36.41

SUBTOTAL of Receipts This Page (optional)

99.73

TOTAL This Period (last page this line 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 / 156
(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 HAUSCHILDT

Mailing Address 636 ROSEDALE AVE

City ROSELLE State IL Zip Code 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 ▼ 204.04

Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974487
Amount of Each Receipt this Period 25.82

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

Mailing Address 29030 N Spoon Court

City Ivanhoe State IL Zip Code 60060

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 ▼ 488.78

Date of Receipt 04 / 09 / 2010
Transaction ID: A2010-893446
Amount of Each Receipt this Period 70.42

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

Mailing Address 29030 N Spoon Court

City Ivanhoe State IL Zip Code 60060

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 ▼ 559.20

Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974485
Amount of Each Receipt this Period 70.42

SUBTOTAL of Receipts This Page (optional) ► 166.66

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 52 / 156
(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 Allstate Insurance Company Occupation AVP Corporate Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.12

Date of Receipt MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974508

Amount of Each Receipt this Period 25.39

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 Allstate Insurance Company Occupation Sales Consultant Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 232.94

Date of Receipt MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893663

Amount of Each Receipt this Period 33.70

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 Allstate Insurance Company Occupation Sales Consultant Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 266.64

Date of Receipt MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974701

Amount of Each Receipt this Period 33.70

SUBTOTAL of Receipts This Page (optional) ► 92.79

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 53 / 156
(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 VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 710.85

Date of Receipt 04 / 09 / 2010

Transaction ID: A2010-893413

Amount of Each Receipt this Period 103.27

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 VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 814.12

Date of Receipt 04 / 23 / 2010

Transaction ID: A2010-974452

Amount of Each Receipt this Period 103.27

C. Full Name (Last, First, Middle Initial)
PAULA M HODGES

Mailing Address 7310 S 34TH CT

City LINCOLN State NE Zip Code 68516

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 ▼ 204.60

Date of Receipt 04 / 09 / 2010

Transaction ID: A2010-893710

Amount of Each Receipt this Period 29.56

SUBTOTAL of Receipts This Page (optional) ► 236.10

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 54 / 156

(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)
PAULA M HODGES

Mailing Address 7310 S 34TH CT

City State Zip Code
LINCOLN NE 68516

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

Name of Employer Occupation
Allstate Insurance Company Allstate Financial Senior

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 234.16

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974747

Amount of Each Receipt this Period

29.56

B.

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

Mailing Address 1066 Griffith Rd.

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Occupation
Allstate Insurance Company VP Investment Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 319.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893746

Amount of Each Receipt this Period

46.14

C.

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

Mailing Address 1066 Griffith Rd.

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Occupation
Allstate Insurance Company VP Investment Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974783

Amount of Each Receipt this Period

46.14

SUBTOTAL of Receipts This Page (optional) ▶

121.84

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 156
(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)
F M HORD

Mailing Address 1101 S. State Street 1002

City Chicago State IL Zip Code 60605

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

Name of Employer Allstate Insurance Company Occupation Claims Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 223.01

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893462
 Amount of Each Receipt this Period: 32.31

B.

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

Mailing Address 1101 S. State Street 1002

City Chicago State IL Zip Code 60605

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

Name of Employer Allstate Insurance Company Occupation Claims Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.32

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974501
 Amount of Each Receipt this Period: 32.31

C.

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

Mailing Address 21558 W GOLDFINCH CT

City KILDEER State IL Zip Code 60047

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 ▼ 339.91

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893556
 Amount of Each Receipt this Period: 49.65

SUBTOTAL of Receipts This Page (optional) ► 114.27

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 56 / 156

(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)
STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 389.56

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974594

Amount of Each Receipt this Period

49.65

B.

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

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code
CARY IL 60013

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

Name of Employer Occupation
Allstate Insurance Company Senior Sourcing Manager

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 207.53

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893511

Amount of Each Receipt this Period

30.15

C.

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

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code
CARY IL 60013

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

Name of Employer Occupation
Allstate Insurance Company Senior Sourcing Manager

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 237.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974549

Amount of Each Receipt this Period

30.15

SUBTOTAL of Receipts This Page (optional) ▶

109.95

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 57 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 3602 FRANKLIN CT.

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 567.56

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893496

Amount of Each Receipt this Period

81.08

B.

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

Mailing Address 3602 FRANKLIN CT.

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 648.64

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974534

Amount of Each Receipt this Period

81.08

C.

Full Name (Last, First, Middle Initial)
JAMES C JAMIESON

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Field Operations Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 237.53

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893487

Amount of Each Receipt this Period

34.51

SUBTOTAL of Receipts This Page (optional)

196.67

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: (check only one)	PAGE 58 / 156
	<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

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

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 ▼ 272.04

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974525
Amount of Each Receipt this Period: 34.51

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 Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 278.25

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893583
Amount of Each Receipt this Period: 39.75

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 Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 318.00

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974621
Amount of Each Receipt this Period: 39.75

SUBTOTAL of Receipts This Page (optional) ► 114.01

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 59 / 156
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 1430 ROLLING LINKS DRIVE

City State Zip Code
ALPHARETTA GA 30004

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 ▼ 355.39

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893328

Amount of Each Receipt this Period
51.37

B.

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

Mailing Address 1430 ROLLING LINKS DRIVE

City State Zip Code
ALPHARETTA GA 30004

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 ▼ 406.76

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974367

Amount of Each Receipt this Period
51.37

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 ▼ 280.76

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893490

Amount of Each Receipt this Period
40.56

SUBTOTAL of Receipts This Page (optional) ► **143.30**

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 60 / 156

(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)
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 Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 321.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974528

Amount of Each Receipt this Period

40.56

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 ▼ 204.84

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974575

Amount of Each Receipt this Period

25.80

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 Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.85

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893613

Amount of Each Receipt this Period

36.55

SUBTOTAL of Receipts This Page (optional)

102.91

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 61 / 156
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
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 ▼ 292.40

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974651

Amount of Each Receipt this Period
36.55

B.

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

Mailing Address 2050 GLENDALE AVE

City State Zip Code
NORTHBROOK IL 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 ▼ 221.95

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893697

Amount of Each Receipt this Period
32.77

C.

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

Mailing Address 2050 GLENDALE AVE

City State Zip Code
NORTHBROOK IL 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 ▼ 254.72

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974734

Amount of Each Receipt this Period
32.77

SUBTOTAL of Receipts This Page (optional) ► 102.09

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

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

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

FOR LINE NUMBER: PAGE 62 / 156
(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 Finance Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.90

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893498

Amount of Each Receipt this Period
32.70

B. 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 Finance 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 Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974536

Amount of Each Receipt this Period
32.70

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 ▼ 283.16

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893494

Amount of Each Receipt this Period
41.36

SUBTOTAL of Receipts This Page (optional) ► **106.76**

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 63 / 156
(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)
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 ▼ 324.52

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974532

Amount of Each Receipt this Period
41.36

B. Full Name (Last, First, Middle Initial)
JAIKRISHNA KUCHIMANCHI

Mailing Address 1503 ALMADEN LN

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 Planning Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.16

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893612

Amount of Each Receipt this Period
31.52

C. Full Name (Last, First, Middle Initial)
JAIKRISHNA KUCHIMANCHI

Mailing Address 1503 ALMADEN LN

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 Planning Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.68

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974650

Amount of Each Receipt this Period
31.52

SUBTOTAL of Receipts This Page (optional) ► 104.40

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: (check only one)	PAGE 64 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) Joseph Lacher	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 2775 Sanders Road Suite A5	Transaction ID: A2010-893764
	City State Zip Code Northbrook IL 60062	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Allstate Insurance Company	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

B.	Full Name (Last, First, Middle Initial) Joseph Lacher	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 2775 Sanders Road Suite A5	Transaction ID: A2010-974801
	City State Zip Code Northbrook IL 60062	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Allstate Insurance Company	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

C.	Full Name (Last, First, Middle Initial) MICHAEL A LAMONICA	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 20580 HIGH RIDGE DR.	Transaction ID: A2010-893540
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 70.71
	FEC ID number of contributing federal political committee. C	
Name of Employer Allstate Insurance Company	Occupation Vice President Product	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 489.41	

SUBTOTAL of Receipts This Page (optional)	370.71
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 20580 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 Vice President Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.12

Date of Receipt 04 / 23 / 2010

Transaction ID: A2010-974578

Amount of Each Receipt this Period 70.71

B.

Full Name (Last, First, Middle Initial)
Richard J Law

Mailing Address 3 Jackson Manor Court

City State Zip Code
Phoenix MD 21131

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Vice President - Presiden

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 830.91

Date of Receipt 04 / 09 / 2010

Transaction ID: A2010-893761

Amount of Each Receipt this Period 120.05

C.

Full Name (Last, First, Middle Initial)
Richard J Law

Mailing Address 3 Jackson Manor Court

City State Zip Code
Phoenix MD 21131

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Vice President - Presiden

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.96

Date of Receipt 04 / 23 / 2010

Transaction ID: A2010-974798

Amount of Each Receipt this Period 120.05

SUBTOTAL of Receipts This Page (optional) 310.81

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 66 / 156
(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 E LAWSON

Mailing Address 1190 Palmer AVENUE

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 552.84

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893703

Amount of Each Receipt this Period
79.96

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

Mailing Address 1190 Palmer AVENUE

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 632.80

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974740

Amount of Each Receipt this Period
79.96

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

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 441.71

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893736

Amount of Each Receipt this Period
64.17

SUBTOTAL of Receipts This Page (optional) ► **224.09**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <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) MICHELLE LEE	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 1404 100TH AVENUE NE	Transaction ID: A2010-974773
	City State Zip Code BELLEVUE WA 98004	Amount of Each Receipt this Period 64.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Field Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 505.88	

B.	Full Name (Last, First, Middle Initial) SUSAN L LEES	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 1705 DARTMOUTH LN	Transaction ID: A2010-893327
	City State Zip Code DEERFIELD IL 60015	Amount of Each Receipt this Period 29.71
	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 ▼ 205.09	

C.	Full Name (Last, First, Middle Initial) SUSAN L LEES	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 1705 DARTMOUTH LN	Transaction ID: A2010-974366
	City State Zip Code DEERFIELD IL 60015	Amount of Each Receipt this Period 29.71
	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 ▼ 234.80	

SUBTOTAL of Receipts This Page (optional)	▶	123.59
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 68 / 156

(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)
ANDREW P LEICHT
Mailing Address 2318 Coach Rd.

City State Zip Code
Long Grove IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Architect

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974540

Amount of Each Receipt this Period
26.54

B.

Full Name (Last, First, Middle Initial)
CHRISTOPHER T LONGEWAY
Mailing Address 4536 N. Leavitt

City State Zip Code
CHICAGO IL 60625

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 ▼ 213.95

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893551

Amount of Each Receipt this Period
31.25

C.

Full Name (Last, First, Middle Initial)
CHRISTOPHER T LONGEWAY
Mailing Address 4536 N. Leavitt

City State Zip Code
CHICAGO IL 60625

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 ▼ 245.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974589

Amount of Each Receipt this Period
31.25

SUBTOTAL of Receipts This Page (optional) ▶

89.04

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 69 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <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 W LOPEZ Jr		Date of Receipt
	Mailing Address 456 S. Wilke Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 23 / 2010
	City	State	Zip Code
	Palatine	IL	60074
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-974587
		Amount of Each Receipt this Period	
		<input type="text"/> 26.51	
Name of Employer Allstate Insurance Company		Occupation Allstate Financial Senior	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 209.48	

B.	Full Name (Last, First, Middle Initial) GREGORY J LUCETT		Date of Receipt
	Mailing Address P.O. BOX 9242		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 09 / 2010
	City	State	Zip Code
	GLENDALE	CA	91226
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-893738
		Amount of Each Receipt this Period	
		<input type="text"/> 31.36	
Name of Employer Allstate Insurance Company		Occupation Managing Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 217.04	

C.	Full Name (Last, First, Middle Initial) GREGORY J LUCETT		Date of Receipt
	Mailing Address P.O. BOX 9242		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 23 / 2010
	City	State	Zip Code
	GLENDALE	CA	91226
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-974775
		Amount of Each Receipt this Period	
		<input type="text"/> 31.36	
Name of Employer Allstate Insurance Company		Occupation Managing Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 248.40	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 89.23
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 / 156

(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 E LUMICAO

Mailing Address 343 S. DEARBORN ST., APT. 504

City State Zip Code
CHICAGO IL 60604

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 ▼ 233.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893596

Amount of Each Receipt this Period

33.64

B.

Full Name (Last, First, Middle Initial)
BENJAMIN E LUMICAO

Mailing Address 343 S. DEARBORN ST., APT. 504

City State Zip Code
CHICAGO IL 60604

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 ▼ 267.12

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974634

Amount of Each Receipt this Period

33.64

C.

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

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

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

Name of Employer Allstate Insurance Company Occupation Regional Sales Leader

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 209.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893656

Amount of Each Receipt this Period

29.96

SUBTOTAL of Receipts This Page (optional) ▶

97.24

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 71 / 156
(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 MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

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

Name of Employer Allstate Insurance Company Occupation Regional Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 239.68

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974694

Amount of Each Receipt this Period
29.96

B.

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 ▼ 283.94

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893351

Amount of Each Receipt this Period
41.62

C.

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 ▼ 325.56

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974390

Amount of Each Receipt this Period
41.62

SUBTOTAL of Receipts This Page (optional) ► **113.20**

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 72 / 156

(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		Date of Receipt
	Mailing Address 155 BUCKLEY ROAD		<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BARRINGTON HILL	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-893581
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" value="564.47"/>	<input type="text" value="82.45"/>

B.	Full Name (Last, First, Middle Initial) MARY J MC GINN		Date of Receipt
	Mailing Address 155 BUCKLEY ROAD		<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BARRINGTON HILL	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-974619
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" value="646.92"/>	<input type="text" value="82.45"/>

C.	Full Name (Last, First, Middle Initial) JOHN A MC LAUGHLIN		Date of Receipt
	Mailing Address 25748 N. Stoney Kirk Ct.		<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Hawthorn Woods	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-893526
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" value="280.72"/>	<input type="text" value="40.56"/>

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line 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 73 / 156
(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)
JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City Hawthorn Woods State IL Zip Code 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 ▼ 321.28

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974564
 Amount of Each Receipt this Period: 40.56

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

Mailing Address 103 Wateredge Court

City Safety Harbor State FL Zip Code 34695

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 ▼ 262.46

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893715
 Amount of Each Receipt this Period: 38.34

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

Mailing Address 103 Wateredge Court

City Safety Harbor State FL Zip Code 34695

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 ▼ 300.80

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974752
 Amount of Each Receipt this Period: 38.34

SUBTOTAL of Receipts This Page (optional) ► 117.24

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 74 / 156

(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 MCKINNEY

Mailing Address 5065 Raintree Circle

City State Zip Code
Parker CO 80134

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 ▼
206.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	0

Transaction ID: A2010-974446

Amount of Each Receipt this Period

25.99

B.

Full Name (Last, First, Middle Initial)
PETER D MCPHERSON

Mailing Address 180 EVERGREEN AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Occupation
Allstate Insurance Company Senior Actuary and Direct

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
230.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	1	0

Transaction ID: A2010-893516

Amount of Each Receipt this Period

33.20

C.

Full Name (Last, First, Middle Initial)
PETER D MCPHERSON

Mailing Address 180 EVERGREEN AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Occupation
Allstate Insurance Company Senior Actuary and Direct

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
263.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	0

Transaction ID: A2010-974554

Amount of Each Receipt this Period

33.20

SUBTOTAL of Receipts This Page (optional) ▶

92.39

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 75 / 156

(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 Occupation
Allstate Insurance Company Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 244.83

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893343

Amount of Each Receipt this Period

35.37

B.

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 Occupation
Allstate Insurance Company Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.20

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974382

Amount of Each Receipt this Period

35.37

C.

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 Occupation
Allstate Insurance Company Regional EB Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.34

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893460

Amount of Each Receipt this Period

28.59

SUBTOTAL of Receipts This Page (optional)

99.33

TOTAL This Period (last page this line 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 76 / 156

(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 Occupation
Allstate Insurance Company Regional EB Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 228.93

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974499

Amount of Each Receipt this Period

28.59

B.

Full Name (Last, First, Middle Initial)
DEBBIE A MORALES

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 ▼ 248.29

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893672

Amount of Each Receipt this Period

36.07

C.

Full Name (Last, First, Middle Initial)
DEBBIE A MORALES

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 ▼ 284.36

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974710

Amount of Each Receipt this Period

36.07

SUBTOTAL of Receipts This Page (optional)

100.73

TOTAL This Period (last page this line 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 / 156
(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)
KAREN S MORRIS

Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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 ▼ 299.63

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893600

Amount of Each Receipt this Period
43.41

B. Full Name (Last, First, Middle Initial)
KAREN S MORRIS

Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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 ▼ 343.04

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974638

Amount of Each Receipt this Period
43.41

C. Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.39

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893405

Amount of Each Receipt this Period
35.77

SUBTOTAL of Receipts This Page (optional) ► **122.59**

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 78 / 156
(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 Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.16

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974444
 Amount of Each Receipt this Period: 35.77

B.

Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 277.14

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893499
 Amount of Each Receipt this Period: 40.26

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 ▼ 317.40

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974537
 Amount of Each Receipt this Period: 40.26

SUBTOTAL of Receipts This Page (optional) ► 116.29

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 79 / 156
	(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 MURPHY		Date of Receipt
	Mailing Address 1908 N. Silver Lake Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 0 9 / 2 0 1 0
	City	State	Zip Code
	Arlington Heights	IL	60004
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-893686
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 ▼ 278.39	<input type="text"/> 39.77

B.	Full Name (Last, First, Middle Initial) MICHAEL A MURPHY		Date of Receipt
	Mailing Address 1908 N. Silver Lake Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 2 3 / 2 0 1 0
	City	State	Zip Code
	Arlington Heights	IL	60004
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-974723
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 ▼ 318.16	<input type="text"/> 39.77

C.	Full Name (Last, First, Middle Initial) DAVID G NADIG		Date of Receipt
	Mailing Address 2950 LAKE PLACID		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 0 9 / 2 0 1 0
	City	State	Zip Code
	NORTHBROOK	IL	60062
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-893622
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 ▼ 396.48	<input type="text"/> 57.60

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 137.14
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 80 / 156
(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 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 Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 454.08

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974660
Amount of Each Receipt this Period: 57.60

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

Mailing Address 22622 N. LINDEN DR

City LAKE BARRINGTON State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 822.77

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893479
Amount of Each Receipt this Period: 118.87

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

Mailing Address 22622 N. LINDEN DR

City LAKE BARRINGTON State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 941.64

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974517
Amount of Each Receipt this Period: 118.87

SUBTOTAL of Receipts This Page (optional) ► 295.34

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 81 / 156

(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 Occupation
Allstate Insurance Company Vice President Human Reso

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 385.42

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893688

Amount of Each Receipt this Period

56.30

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 Occupation
Allstate Insurance Company Vice President Human Reso

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 441.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974725

Amount of Each Receipt this Period

56.30

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 Occupation
Allstate Insurance Company Human Resource Senior Man

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893614

Amount of Each Receipt this Period

31.06

SUBTOTAL of Receipts This Page (optional)

143.66

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 82 / 156
(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 ▼ 247.36

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974652

Amount of Each Receipt this Period
31.06

B.

Full Name (Last, First, Middle Initial)
NICHOLAS A NOTTE

Mailing Address 743 OLD WESTBURY RD.

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation Claims Field Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 297.26

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893749

Amount of Each Receipt this Period
43.42

C.

Full Name (Last, First, Middle Initial)
NICHOLAS A NOTTE

Mailing Address 743 OLD WESTBURY RD.

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation Claims Field Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.68

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974786

Amount of Each Receipt this Period
43.42

SUBTOTAL of Receipts This Page (optional) ► 117.90

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 83 / 156

(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 M O'Brien

Mailing Address 976 Hampton Park

City State Zip Code
Barrington IL 60010

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

Name of Employer Occupation
Allstate Insurance Company AVP - Emerging Business

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 453.11

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893760

Amount of Each Receipt this Period

64.73

B.

Full Name (Last, First, Middle Initial)
Patrick M O'Brien

Mailing Address 976 Hampton Park

City State Zip Code
Barrington IL 60010

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

Name of Employer Occupation
Allstate Insurance Company AVP - Emerging Business

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 517.84

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974797

Amount of Each Receipt this Period

64.73

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 Territorial Sales Leader

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 208.86

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893365

Amount of Each Receipt this Period

30.26

SUBTOTAL of Receipts This Page (optional) ▶

159.72

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 84 / 156
(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 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 Allstate Insurance Company Occupation Territorial Sales Leader

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 239.12

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974404
Amount of Each Receipt this Period: 30.26

B. Full Name (Last, First, Middle Initial)
ROGER D ODLE II, II

Mailing Address 5170 BARCROFT DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60010

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 ▼ 282.46

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893588
Amount of Each Receipt this Period: 41.26

C. Full Name (Last, First, Middle Initial)
ROGER D ODLE II, II

Mailing Address 5170 BARCROFT DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60010

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 ▼ 323.72

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974626
Amount of Each Receipt this Period: 41.26

SUBTOTAL of Receipts This Page (optional) ► 112.78

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: PAGE 85 / 156

(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)

KATHY A OLCESE

Mailing Address 133 S. Mitchell

City State Zip Code
Arlington Heights IL 60005

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

Name of Employer Occupation
Allstate Insurance Company AVP-Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 203.84

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974500

Amount of Each Receipt this Period
25.86

B.

Full Name (Last, First, Middle Initial)

KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code
DEERFIELD IL 60015

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 ▼ 279.56

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893453

Amount of Each Receipt this Period
40.16

C.

Full Name (Last, First, Middle Initial)

KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code
DEERFIELD IL 60015

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 ▼ 319.72

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974492

Amount of Each Receipt this Period
40.16

SUBTOTAL of Receipts This Page (optional) ▶

106.18

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 86 / 156
(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 PCCSO Fiel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.64

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893678

Amount of Each Receipt this Period
71.16

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 PCCSO Fiel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 561.80

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974716

Amount of Each Receipt this Period
71.16

C.

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

Mailing Address 23475 W. Newhaven Dr.

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 PCCSO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.77

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893442

Amount of Each Receipt this Period
43.43

SUBTOTAL of Receipts This Page (optional) ► **185.75**

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 87 / 156

(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 J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Occupation
Allstate Insurance Company AVP PCCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 343.20

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974481

Amount of Each Receipt this Period
43.43

B.

Full Name (Last, First, Middle Initial)
DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City State Zip Code
EDGEWATER MD 21037

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 ▼ 301.55

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893400

Amount of Each Receipt this Period
44.05

C.

Full Name (Last, First, Middle Initial)
DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City State Zip Code
EDGEWATER MD 21037

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 ▼ 345.60

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974439

Amount of Each Receipt this Period
44.05

SUBTOTAL of Receipts This Page (optional) ▶

131.53

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 88 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <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	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 742 E PARKVIEW CT	Transaction ID: A2010-893522
	City State Zip Code ROSELLE IL 60172	Amount of Each Receipt this Period 32.18
	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 ▼ 221.50	

B.	Full Name (Last, First, Middle Initial) MAYUR M PATEL	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 742 E PARKVIEW CT	Transaction ID: A2010-974560
	City State Zip Code ROSELLE IL 60172	Amount of Each Receipt this Period 32.18
	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 ▼ 253.68	

C.	Full Name (Last, First, Middle Initial) CHARLES PAUL	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 301 CAMELOT LANE	Transaction ID: A2010-893389
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 77.79
	FEC ID number of contributing federal political committee. C	
Name of Employer Allstate Insurance Company	Occupation General Vice President Em	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 538.41	

SUBTOTAL of Receipts This Page (optional)	142.15
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 89 / 156
(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)
CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation General Vice President Em

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 616.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974428

Amount of Each Receipt this Period
77.79

B. Full Name (Last, First, Middle Initial)
LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City State Zip Code
GLENVIEW IL 60025

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 ▼ 269.63

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893616

Amount of Each Receipt this Period
39.17

C. Full Name (Last, First, Middle Initial)
LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City State Zip Code
GLENVIEW IL 60025

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 ▼ 308.80

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974654

Amount of Each Receipt this Period
39.17

SUBTOTAL of Receipts This Page (optional) ► 156.13

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 90 / 156
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
RONALD J PEPPING

Mailing Address 2721 Acorn Ct.

City State Zip Code
West Dundee IL 60118

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 ▼ 213.85

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893564

Amount of Each Receipt this Period
31.07

B.

Full Name (Last, First, Middle Initial)
RONALD J PEPPING

Mailing Address 2721 Acorn Ct.

City State Zip Code
West Dundee IL 60118

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 ▼ 244.92

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974602

Amount of Each Receipt this Period
31.07

C.

Full Name (Last, First, Middle Initial)
FLORIE S PERELLIS

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
LAKE FOREST IL 60045

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 364.69

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893356

Amount of Each Receipt this Period
52.83

SUBTOTAL of Receipts This Page (optional) ► **114.97**

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

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

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

FOR LINE NUMBER: PAGE 91 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
FLORIE S PERELLIS

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
LAKE FOREST IL 60045

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 417.52

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974395

Amount of Each Receipt this Period

52.83

B.

Full Name (Last, First, Middle Initial)
JOHN M PETERS

Mailing Address 6727 N Sioux Ave

City State Zip Code
CHICAGO IL 60646

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

Name of Employer Occupation
Allstate Insurance Company Allstate Financial Senior

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 213.33

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893727

Amount of Each Receipt this Period

30.99

C.

Full Name (Last, First, Middle Initial)
JOHN M PETERS

Mailing Address 6727 N Sioux Ave

City State Zip Code
CHICAGO IL 60646

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

Name of Employer Occupation
Allstate Insurance Company Allstate Financial Senior

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 244.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974764

Amount of Each Receipt this Period

30.99

SUBTOTAL of Receipts This Page (optional)

114.81

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 92 / 156
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) THOMAS S PETERSON		Date of Receipt
	Mailing Address 2756 BRECKENRIDGE LANE		<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NAPERVILLE	IL	60565
	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: A2010-893748
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="217.75"/>	<input type="text" value="31.37"/>

B.	Full Name (Last, First, Middle Initial) THOMAS S PETERSON		Date of Receipt
	Mailing Address 2756 BRECKENRIDGE LANE		<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NAPERVILLE	IL	60565
	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: A2010-974785
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="249.12"/>	<input type="text" value="31.37"/>

C.	Full Name (Last, First, Middle Initial) STEVEN A PETTI		Date of Receipt
	Mailing Address 580 SALCEDA DR		<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MUNDELEIN	IL	60060
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation AVP Property & Casualty F	Transaction ID: A2010-893355
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="357.20"/>	<input type="text" value="51.32"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="114.06"/>
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 / 156

(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 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 Occupation
Allstate Insurance Company AVP Property & Casualty F

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 408.52

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974394

Amount of Each Receipt this Period

51.32

B.

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 Occupation
Allstate Insurance Company Vice President Finance -

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 506.88

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893478

Amount of Each Receipt this Period

74.04

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 Occupation
Allstate Insurance Company Vice President Finance -

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 580.92

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974516

Amount of Each Receipt this Period

74.04

SUBTOTAL of Receipts This Page (optional)

199.40

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: (check only one)	PAGE 94 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <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) Mark D Pitchford		Date of Receipt
	Mailing Address 653 Hinman 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
	Evanston	IL	60202
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-893752
Name of Employer Allstate Insurance Company		Occupation VP Direct 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 ▼	<input type="text"/> 67.88
		<input type="text"/> 467.28	

B.	Full Name (Last, First, Middle Initial) Mark D Pitchford		Date of Receipt
	Mailing Address 653 Hinman 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
	Evanston	IL	60202
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-974789
Name of Employer Allstate Insurance Company		Occupation VP Direct 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 ▼	<input type="text"/> 67.88
		<input type="text"/> 535.16	

C.	Full Name (Last, First, Middle Initial) DAVID J PRENDERGAST		Date of Receipt
	Mailing Address 2816 HAVEN 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
	City	State	Zip Code
	LINDENHURST	IL	60046
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-893349
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"/> 48.49
		<input type="text"/> 333.79	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 184.25
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 / 156
(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 J PRENDERGAST

Mailing Address 2816 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 Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 382.28

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974388

Amount of Each Receipt this Period
48.49

B. 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 Product Operations Direct

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.14

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893737

Amount of Each Receipt this Period
33.62

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 Product Operations Direct

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 263.76

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974774

Amount of Each Receipt this Period
33.62

SUBTOTAL of Receipts This Page (optional) ► **115.73**

TOTAL This Period (last page this line 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 / 156

(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 QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code
ARLINGTON HEIGH IL 60005

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 285.53

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893644

Amount of Each Receipt this Period

42.15

B.

Full Name (Last, First, Middle Initial)
MARY J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code
ARLINGTON HEIGH IL 60005

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 327.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974682

Amount of Each Receipt this Period

42.15

C.

Full Name (Last, First, Middle Initial)
JOHN B REARDON

Mailing Address 441 KELLY LANE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Occupation
Allstate Insurance Company Claim Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 317.04

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893331

Amount of Each Receipt this Period

45.80

SUBTOTAL of Receipts This Page (optional) ▶

130.10

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 97 / 156
(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 B REARDON

Mailing Address 441 KELLY LANE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation Claim Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 362.84

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974370

Amount of Each Receipt this Period
45.80

B. Full Name (Last, First, Middle Initial)
KEVIN P RICE

Mailing Address 618 Burdick St.

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 263.64

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893535

Amount of Each Receipt this Period
38.20

C. Full Name (Last, First, Middle Initial)
KEVIN P RICE

Mailing Address 618 Burdick St.

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.84

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974573

Amount of Each Receipt this Period
38.20

SUBTOTAL of Receipts This Page (optional) ► **122.20**

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 98 / 156
(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)
BRIAN R RICHARD

Mailing Address 37 JOSEPH PLACE

City State Zip Code
WAYNE NJ 07470

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

Name of Employer Allstate Insurance Company Occupation Market Sales Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.48

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974363

Amount of Each Receipt this Period
26.89

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

Mailing Address 4968 Astor Court

City State Zip Code
Long Grove IL 60047

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

Name of Employer Allstate Insurance Company Occupation SVP-Protection Distributi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 581.26

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893392

Amount of Each Receipt this Period
85.38

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

Mailing Address 4968 Astor Court

City State Zip Code
Long Grove IL 60047

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

Name of Employer Allstate Insurance Company Occupation SVP-Protection Distributi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 666.64

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974431

Amount of Each Receipt this Period
85.38

SUBTOTAL of Receipts This Page (optional) ► 197.65

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 99 / 156

(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)
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 Occupation
Allstate Insurance Company AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 217.92

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974646

Amount of Each Receipt this Period

27.51

B.

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

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
OAK LAWN IL 60453

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

Name of Employer Occupation
Allstate Insurance Company AVP Finance and Planning

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 329.89

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893538

Amount of Each Receipt this Period

48.19

C.

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

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
OAK LAWN IL 60453

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

Name of Employer Occupation
Allstate Insurance Company AVP Finance and Planning

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 378.08

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974576

Amount of Each Receipt this Period

48.19

SUBTOTAL of Receipts This Page (optional)

123.89

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 101 / 156
(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)
TED ROBERTS

Mailing Address 62 Bart Drive

City State Zip Code
Canton CT 06019

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

Name of Employer Occupation
Allstate Insurance Company Territorial Sales Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.40

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974739

Amount of Each Receipt this Period

31.53

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-P-CCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 710.11

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893552

Amount of Each Receipt this Period

103.85

C.

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-P-CCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 813.96

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974590

Amount of Each Receipt this Period

103.85

SUBTOTAL of Receipts This Page (optional)

239.23

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: PAGE 102 / 156
(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)
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 Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 283.16

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893473

Amount of Each Receipt this Period
41.36

B. 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 Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 324.52

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974512

Amount of Each Receipt this Period
41.36

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 Allstate Insurance Company Occupation Vice President PCCSO Stra

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.76

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893547

Amount of Each Receipt this Period
34.88

SUBTOTAL of Receipts This Page (optional) ► 117.60

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 103 / 156

(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)
DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City State Zip Code
HINSDALE IL 60521

FEC ID number of contributing federal political committee. C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Stra

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.64

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2010

Transaction ID: A2010-974585

Amount of Each Receipt this Period
34.88

B.

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

Mailing Address 3371 VENARD RD.

City State Zip Code
DOWNERS GROVE IL 60515

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 ▼
263.26

Date of Receipt
M M / D D / Y Y Y Y
04 / 09 / 2010

Transaction ID: A2010-893587

Amount of Each Receipt this Period
38.14

C.

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

Mailing Address 3371 VENARD RD.

City State Zip Code
DOWNERS GROVE IL 60515

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 ▼
301.40

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2010

Transaction ID: A2010-974625

Amount of Each Receipt this Period
38.14

SUBTOTAL of Receipts This Page (optional) 111.16

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 104 / 156
(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)
PAUL R RYSKE
Mailing Address 898 E. LONGWOOD DR.
City LAKE FOREST State IL Zip Code 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 ▼ 281.96
Date of Receipt 04 / 09 / 2010
Transaction ID: A2010-893471
Amount of Each Receipt this Period 40.96

B. Full Name (Last, First, Middle Initial)
PAUL R RYSKE
Mailing Address 898 E. LONGWOOD DR.
City LAKE FOREST State IL Zip Code 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 ▼ 322.92
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974510
Amount of Each Receipt this Period 40.96

C. Full Name (Last, First, Middle Initial)
MICHAEL A SCARDINA
Mailing Address 51 SOUTH ROYAL OAK
City VERNON HILLS State IL Zip Code 60061
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AVP Asset Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.45
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974491
Amount of Each Receipt this Period 29.35

SUBTOTAL of Receipts This Page (optional) ► 111.27
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 105 / 156
(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 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 Occupation
Allstate Insurance Company Senior Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.25

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893591

Amount of Each Receipt this Period

31.59

B.

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 Occupation
Allstate Insurance Company Senior Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.84

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974629

Amount of Each Receipt this Period

31.59

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 Occupation
Allstate Insurance Company AVP HR Shared Services

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 382.41

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893383

Amount of Each Receipt this Period

55.19

SUBTOTAL of Receipts This Page (optional) ▶

118.37

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 106 / 156

(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)
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 Occupation
Allstate Insurance Company AVP HR Shared Services

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 437.60

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974422

Amount of Each Receipt this Period

55.19

B.

Full Name (Last, First, Middle Initial)
JEFFREY C SCHULTZ

Mailing Address 573 MADISON LN

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Occupation
Allstate Insurance Company Product Operations Senior

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 217.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974488

Amount of Each Receipt this Period

27.46

C.

Full Name (Last, First, Middle Initial)
DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City State Zip Code
BUFFALO GROVE IL 60089

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 218.60

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974555

Amount of Each Receipt this Period

27.73

SUBTOTAL of Receipts This Page (optional) ▶

110.38

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 107 / 156
(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 SCHWARTZER

Mailing Address 128 Waverly Circle

City State Zip Code
Phoenixville PA 19460

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 ▼ 341.03

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893655

Amount of Each Receipt this Period

49.65

B.

Full Name (Last, First, Middle Initial)
DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City State Zip Code
Phoenixville PA 19460

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 ▼ 390.68

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974693

Amount of Each Receipt this Period

49.65

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 Occupation
Allstate Insurance Company AVP Corporate Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.26

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893580

Amount of Each Receipt this Period

43.62

SUBTOTAL of Receipts This Page (optional)

142.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 156
(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)
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 AVP Corporate Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 343.88

Date of Receipt MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974618

Amount of Each Receipt this Period 43.62

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

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60189

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

Name of Employer Allstate Insurance Company Occupation VP & CFO Allstate Investm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.14

Date of Receipt MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893545

Amount of Each Receipt this Period 86.46

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

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60189

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

Name of Employer Allstate Insurance Company Occupation VP & CFO Allstate Investm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 681.60

Date of Receipt MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974583

Amount of Each Receipt this Period 86.46

SUBTOTAL of Receipts This Page (optional) ► 216.54

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 156
(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 L SIMMONS
Mailing Address 418 DEUCE DRIVE
City WALL State NJ Zip Code 07719
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Home Office Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.42
Date of Receipt 04 / 09 / 2010
Transaction ID: A2010-893374
Amount of Each Receipt this Period 32.78

B. Full Name (Last, First, Middle Initial)
ROBERT L SIMMONS
Mailing Address 418 DEUCE DRIVE
City WALL State NJ Zip Code 07719
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Home Office Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 257.20
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974413
Amount of Each Receipt this Period 32.78

C. Full Name (Last, First, Middle Initial)
KIMBALL S SIMON
Mailing Address 11 WEHRHEIM
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 Systems Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 271.41
Date of Receipt 04 / 09 / 2010
Transaction ID: A2010-893706
Amount of Each Receipt this Period 39.43

SUBTOTAL of Receipts This Page (optional) ► 104.99
TOTAL This Period (last page this line 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 / 156
(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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 310.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

Transaction ID: A2010-974743

Amount of Each Receipt this Period
39.43

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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 214.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

Transaction ID: A2010-974514

Amount of Each Receipt this Period
27.05

C. Full Name (Last, First, Middle Initial)
KIMBERLY J SLOANE

Mailing Address 378 N. VISTA AVE

City State Zip Code
LOMBARD IL 60148

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

Name of Employer Allstate Insurance Company Occupation Claim Reserve Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 281.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	1	0

Transaction ID: A2010-893570

Amount of Each Receipt this Period
40.96

SUBTOTAL of Receipts This Page (optional) ► **107.44**

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 111 / 156
(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)
KIMBERLY J SLOANE

Mailing Address 378 N. VISTA AVE

City State Zip Code
LOMBARD IL 60148

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 ▼ 322.92

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974608

Amount of Each Receipt this Period
40.96

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 ▼ 240.64

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893659

Amount of Each Receipt this Period
34.84

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 ▼ 275.48

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974697

Amount of Each Receipt this Period
34.84

SUBTOTAL of Receipts This Page (optional) ► **110.64**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 156
(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 ▼ 219.25

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893698

Amount of Each Receipt this Period
32.03

B. 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 ▼ 251.28

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974735

Amount of Each Receipt this Period
32.03

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 Senior Vice President Pro

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 565.04

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893646

Amount of Each Receipt this Period
82.04

SUBTOTAL of Receipts This Page (optional) ► **146.10**

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 113 / 156
(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 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 Senior Vice President Pro

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 647.08

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974684

Amount of Each Receipt this Period
82.04

B.

Full Name (Last, First, Middle Initial)
KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Allstate Insurance Company Occupation Vice President Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.65

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893611

Amount of Each Receipt this Period
34.19

C.

Full Name (Last, First, Middle Initial)
KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Allstate Insurance Company Occupation Vice President Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.84

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974649

Amount of Each Receipt this Period
34.19

SUBTOTAL of Receipts This Page (optional) ► 150.42

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 114 / 156
(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)
EDWIN M SPECHT

Mailing Address 740 AMBRIA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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 ▼ 264.96

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893398

Amount of Each Receipt this Period
38.28

B. Full Name (Last, First, Middle Initial)
EDWIN M SPECHT

Mailing Address 740 AMBRIA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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 ▼ 303.24

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974437

Amount of Each Receipt this Period
38.28

C. Full Name (Last, First, Middle Initial)
JAMES G SPORLEDER

Mailing Address 20 LAKESIDE LANE

City State Zip Code
N. BARRINGTON IL 60010

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 ▼ 223.48

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974642

Amount of Each Receipt this Period
28.07

SUBTOTAL of Receipts This Page (optional) ► **104.63**

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 115 / 156
(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 ▼ 340.12

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893456

Amount of Each Receipt this Period
50.08

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 ▼ 390.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974495

Amount of Each Receipt this Period
50.08

C.

Full Name (Last, First, Middle Initial)
EMORY D STEPHENS JR, 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 ▼ 285.86

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893424

Amount of Each Receipt this Period
41.30

SUBTOTAL of Receipts This Page (optional) ► **141.46**

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 116 / 156
(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)
EMORY D STEPHENS JR, 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 ▼ 327.16

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974463
Amount of Each Receipt this Period: 41.30

B. Full Name (Last, First, Middle Initial)
GARY S STERE
Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

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 ▼ 280.36

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893434
Amount of Each Receipt this Period: 40.84

C. Full Name (Last, First, Middle Initial)
GARY S STERE
Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

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 ▼ 321.20

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974473
Amount of Each Receipt this Period: 40.84

SUBTOTAL of Receipts This Page (optional) ► 122.98

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

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

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

FOR LINE NUMBER: PAGE 117 / 156

(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)
MYRON E STOUFFER

Mailing Address 1528 JESSICA LANE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 207.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	0

Transaction ID: A2010-974469

Amount of Each Receipt this Period

26.36

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 Occupation
Allstate Insurance Company AVP PCCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	0

Transaction ID: A2010-974364

Amount of Each Receipt this Period

26.72

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 Occupation
Allstate Insurance Company Vice President Auditing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 402.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	1	0

Transaction ID: A2010-893483

Amount of Each Receipt this Period

58.28

SUBTOTAL of Receipts This Page (optional) ▶

111.36

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 118 / 156
(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 Vice President Auditing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.56
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974521
Amount of Each Receipt this Period 58.28

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 ▼ 272.79
Date of Receipt 04 / 09 / 2010
Transaction ID: A2010-893521
Amount of Each Receipt this Period 39.41

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 ▼ 312.20
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974559
Amount of Each Receipt this Period 39.41

SUBTOTAL of Receipts This Page (optional) ► 137.10
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 119 / 156
	(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) GERALYN A THOMPSON		Date of Receipt
	Mailing Address 6906 S. BENNETT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 09 / 2010
	City	State	Zip Code
	CHICAGO	IL	60649
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-893524
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"/> 31.86
		<input type="text"/> 221.74	

B.	Full Name (Last, First, Middle Initial) GERALYN A THOMPSON		Date of Receipt
	Mailing Address 6906 S. BENNETT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 23 / 2010
	City	State	Zip Code
	CHICAGO	IL	60649
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-974562
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"/> 31.86
		<input type="text"/> 253.60	

C.	Full Name (Last, First, Middle Initial) MARK L THOMPSON		Date of Receipt
	Mailing Address 3233 N RACINE #2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 23 / 2010
	City	State	Zip Code
	CHICAGO	IL	60657
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-974730
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"/> 28.00
		<input type="text"/> 219.68	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 91.72
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 120 / 156
(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 J THOMPSON

Mailing Address 1104 Spruce Run Drive

City State Zip Code
Roanoke TX 76262

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 ▼ 284.09

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893421
Amount of Each Receipt this Period 41.27

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

Mailing Address 1104 Spruce Run Drive

City State Zip Code
Roanoke TX 76262

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 ▼ 325.36

Date of Receipt: 04 / 23 / 2010
Transaction ID: A2010-974460
Amount of Each Receipt this Period 41.27

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

Mailing Address 531 S ALLEN LANE

City State Zip Code
ARLINGTON HTS IL 60005

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

Name of Employer Allstate Insurance Company Occupation Senior Marketing Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.86

Date of Receipt: 04 / 09 / 2010
Transaction ID: A2010-893546
Amount of Each Receipt this Period 32.98

SUBTOTAL of Receipts This Page (optional) ► 115.52

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 156
(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 C THOMSON
Mailing Address 531 S ALLEN LANE
City ARLINGTON HTS State IL Zip Code 60005
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior Marketing Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 263.84
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974584
Amount of Each Receipt this Period 32.98

B. Full Name (Last, First, Middle Initial)
ROBERT E TRANSON
Mailing Address 2644 N DOUGLAS
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 Strategic Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 209.46
Date of Receipt 04 / 09 / 2010
Transaction ID: A2010-893536
Amount of Each Receipt this Period 30.26

C. Full Name (Last, First, Middle Initial)
ROBERT E TRANSON
Mailing Address 2644 N DOUGLAS
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 Strategic Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 239.72
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974574
Amount of Each Receipt this Period 30.26

SUBTOTAL of Receipts This Page (optional) ► 93.50
TOTAL This Period (last page this line 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 122 / 156
(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)
MELINDA S TUNNER

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP Agency Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 343.54

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893671

Amount of Each Receipt this Period
50.18

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

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP Agency Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 393.72

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974709

Amount of Each Receipt this Period
50.18

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

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

Name of Employer Allstate Insurance Company Occupation Vice President & Assistan

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.52

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893543

Amount of Each Receipt this Period
57.72

SUBTOTAL of Receipts This Page (optional) ► 158.08

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 123 / 156

(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 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 Occupation
Allstate Insurance Company Vice President & Assistan

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 457.24

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974581

Amount of Each Receipt this Period

57.72

B.

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 ▼ 229.89

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893482

Amount of Each Receipt this Period

33.03

C.

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 ▼ 262.92

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974520

Amount of Each Receipt this Period

33.03

SUBTOTAL of Receipts This Page (optional)

123.78

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: PAGE 124 / 156
(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 C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City State Zip Code
Wilmette IL 60091

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.29

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893705

Amount of Each Receipt this Period
63.47

B. Full Name (Last, First, Middle Initial)
PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City State Zip Code
Wilmette IL 60091

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 484.76

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974742

Amount of Each Receipt this Period
63.47

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

Mailing Address 2514 S WESLEY AVENUE

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 ▼ 280.76

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893472

Amount of Each Receipt this Period
40.56

SUBTOTAL of Receipts This Page (optional) ► **167.50**

TOTAL This Period (last page this line 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 125 / 156
(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 VAVRA

Mailing Address 2514 S WESLEY AVENUE

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 ▼ 321.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974511

Amount of Each Receipt this Period
40.56

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 ▼ 549.18

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893368

Amount of Each Receipt this Period
76.15

C.

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 ▼ 625.33

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974407

Amount of Each Receipt this Period
76.15

SUBTOTAL of Receipts This Page (optional) ► **192.86**

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 126 / 156
(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 Lake Forest State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-Corporate Relations
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00
Date of Receipt 04 / 09 / 2010
Transaction ID: A2010-893745
Amount of Each Receipt this Period 51.92

B. Full Name (Last, First, Middle Initial)
JOAN H WALKER
Mailing Address 850 N. Riverwoods Road
City Lake Forest State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-Corporate Relations
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 411.92
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974782
Amount of Each Receipt this Period 51.92

C. Full Name (Last, First, Middle Initial)
MADELINE J WALKER
Mailing Address 5140 N SAN JUAN AVE
City CLOVIS State CA Zip Code 93611
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Market Claim Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 200.09
Date of Receipt 04 / 09 / 2010
Transaction ID: A2010-893450
Amount of Each Receipt this Period 28.79

SUBTOTAL of Receipts This Page (optional) ► 132.63
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 127 / 156
(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)
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 Market Claim Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.88

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974489

Amount of Each Receipt this Period
28.79

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

Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

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

Name of Employer Allstate Insurance Company Occupation AVP-Credit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 447.70

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893433

Amount of Each Receipt this Period
64.62

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

Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

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

Name of Employer Allstate Insurance Company Occupation AVP-Credit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 512.32

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974472

Amount of Each Receipt this Period
64.62

SUBTOTAL of Receipts This Page (optional) ► 158.03

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 128 / 156
(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)
THOMAS M WARDEN
 Mailing Address 770 Bair Island Road #200
 City State Zip Code
 Redwood City CA 94063
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 9 / 2 0 1 0
Transaction ID: A2010-893445
 Amount of Each Receipt this Period
 36.25
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation AVP Research Center
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 248.19

B. Full Name (Last, First, Middle Initial)
THOMAS M WARDEN
 Mailing Address 770 Bair Island Road #200
 City State Zip Code
 Redwood City CA 94063
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 3 / 2 0 1 0
Transaction ID: A2010-974484
 Amount of Each Receipt this Period
 36.25
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation AVP Research Center
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.44

C. Full Name (Last, First, Middle Initial)
EDWIN L WASINGER JR, Jr.
 Mailing Address 6245 MURIFIELD DRIVE
 City State Zip Code
 GURNEE IL 60031
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 9 / 2 0 1 0
Transaction ID: A2010-893617
 Amount of Each Receipt this Period
 38.32
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Product Operations Direct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.24

SUBTOTAL of Receipts This Page (optional) ► **110.82**
TOTAL This Period (last page this line 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 / 156
(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)
EDWIN L WASINGER JR, 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 Allstate Insurance Company Occupation Product Operations Direct
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 303.56
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974655
Amount of Each Receipt this Period 38.32

B. Full Name (Last, First, Middle Initial)
Robert Wasserman
Mailing Address 1N165 Partridge Dr
City State Zip Code
Wheaton IL 60188
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 447.28
Date of Receipt 04 / 09 / 2010
Transaction ID: A2010-893763
Amount of Each Receipt this Period 64.48

C. Full Name (Last, First, Middle Initial)
Robert Wasserman
Mailing Address 1N165 Partridge Dr
City State Zip Code
Wheaton IL 60188
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 511.76
Date of Receipt 04 / 23 / 2010
Transaction ID: A2010-974800
Amount of Each Receipt this Period 64.48

SUBTOTAL of Receipts This Page (optional) ► 167.28
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 130 / 156
(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 ▼ 234.04

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893696

Amount of Each Receipt this Period
34.00

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 ▼ 268.04

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974733

Amount of Each Receipt this Period
34.00

C.

Full Name (Last, First, Middle Initial)
SAMUEL W WHITEMAN

Mailing Address 47 Park View 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 Claims Field Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.08

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893683

Amount of Each Receipt this Period
35.36

SUBTOTAL of Receipts This Page (optional) ► **103.36**

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 131 / 156
(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)
SAMUEL W WHITEMAN

Mailing Address 47 Park View 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 Claims Field Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 279.44

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974721

Amount of Each Receipt this Period
35.36

B. 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 ▼ 278.39

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893423

Amount of Each Receipt this Period
39.77

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 ▼ 318.16

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974462

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional) ► 114.90

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 132 / 156
(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 K WILCOX

Mailing Address 1120 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 Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.45

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893500

Amount of Each Receipt this Period
35.23

B.

Full Name (Last, First, Middle Initial)
JOHN K WILCOX

Mailing Address 1120 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 Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.68

Date of Receipt
MM / DD / YYYY
04 / 23 / 2010

Transaction ID: A2010-974538

Amount of Each Receipt this Period
35.23

C.

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

Mailing Address 21030 W YORKSHIRE DR

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation Chief Diversity Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.91

Date of Receipt
MM / DD / YYYY
04 / 09 / 2010

Transaction ID: A2010-893711

Amount of Each Receipt this Period
48.13

SUBTOTAL of Receipts This Page (optional) ► **118.59**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 156
(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)
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 Chief Diversity Officer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.04

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974748

Amount of Each Receipt this Period 48.13

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 ▼ 281.91

Date of Receipt M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893525

Amount of Each Receipt this Period 40.73

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 ▼ 322.64

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974563

Amount of Each Receipt this Period 40.73

SUBTOTAL of Receipts This Page (optional) 129.59

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: (check only one)	PAGE 134 / 156
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) THOMAS J WILSON	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 2024 N. MOHAWK	Transaction ID: A2010-893642
	City State Zip Code CHICAGO IL 60614	Amount of Each Receipt this Period 253.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1740.03

B.	Full Name (Last, First, Middle Initial) THOMAS J WILSON	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 2024 N. MOHAWK	Transaction ID: A2010-974680
	City State Zip Code CHICAGO IL 60614	Amount of Each Receipt this Period 253.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1993.88

C.	Full Name (Last, First, Middle Initial) ANGELA K WOIROL	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 28616 Sky Crest Dr	Transaction ID: A2010-893684
	City State Zip Code Ivanhoe IL 60060	Amount of Each Receipt this Period 33.11
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claim Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.49

SUBTOTAL of Receipts This Page (optional)	540.81
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 156
(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)
ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City State Zip Code
Ivanhoe IL 60060

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 ▼ 258.60

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974722

Amount of Each Receipt this Period
33.11

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

Mailing Address 7 WELLESLEY 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 Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.01

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893370

Amount of Each Receipt this Period
33.43

C. Full Name (Last, First, Middle Initial)
MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY 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 Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 267.44

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974409

Amount of Each Receipt this Period
33.43

SUBTOTAL of Receipts This Page (optional) ► 99.97

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 / 156
(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)
DONALD F WYATT JR, Jr.

Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.70

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893503

Amount of Each Receipt this Period
36.98

B.

Full Name (Last, First, Middle Initial)
DONALD F WYATT JR, Jr.

Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 293.68

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974541

Amount of Each Receipt this Period
36.98

C.

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

Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

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

Name of Employer Allstate Insurance Company Occupation VP Knowledge Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 378.22

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893569

Amount of Each Receipt this Period
55.54

SUBTOTAL of Receipts This Page (optional) ► **129.50**

TOTAL This Period (last page this line 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 / 156

(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 VP Knowledge Development

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 433.76

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974607

Amount of Each Receipt this Period

55.54

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 Vice President Procuremen

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 384.76

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893576

Amount of Each Receipt this Period

56.20

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 Vice President Procuremen

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 440.96

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974614

Amount of Each Receipt this Period

56.20

SUBTOTAL of Receipts This Page (optional)

167.94

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 138 / 156
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
RICHARD P YOCIUS

Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Allstate Insurance Company Occupation AVP-Product Pricing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.31

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893504

Amount of Each Receipt this Period
43.65

B.

Full Name (Last, First, Middle Initial)
RICHARD P YOCIUS

Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Allstate Insurance Company Occupation AVP-Product Pricing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 344.96

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974542

Amount of Each Receipt this Period
43.65

C.

Full Name (Last, First, Middle Initial)
CYNTHIA H YOUNG

Mailing Address 1861 N. Sawgrass Street

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Allstate Insurance Company Occupation VP-Ivantage/Independent A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 768.07

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893742

Amount of Each Receipt this Period
110.53

SUBTOTAL of Receipts This Page (optional) ► **197.83**

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 139 / 156
(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)
CYNTHIA H YOUNG

Mailing Address 1861 N. Sawgrass Street

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Allstate Insurance Company Occupation VP-Ivantage/Independent A

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 878.60

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974779

Amount of Each Receipt this Period 110.53

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 Allstate Insurance Company Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.46

Date of Receipt M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893566

Amount of Each Receipt this Period 37.42

C. 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 Allstate Insurance Company Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.88

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974604

Amount of Each Receipt this Period 37.42

SUBTOTAL of Receipts This Page (optional) ► **185.37**

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 140 / 156
(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 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 ▼ 471.03

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893658

Amount of Each Receipt this Period
67.29

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

Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation AVP Allstate Life Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 538.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: A2010-974696

Amount of Each Receipt this Period
67.29

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

Mailing Address 2584 Sutton Lane

City State Zip Code
AURORA IL 60502

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 ▼ 273.97

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: A2010-893650

Amount of Each Receipt this Period
40.23

SUBTOTAL of Receipts This Page (optional) ► **174.81**

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 141 / 156
(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)
GERALD L ZIMMERMAN JR, Jr.
 Mailing Address 2584 Sutton Lane
 City State Zip Code
 AURORA IL 60502
 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 ▼
 314.20

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 3 / 2 0 1 0
Transaction ID: A2010-974688
 Amount of Each Receipt this Period
 40.23

SUBTOTAL of Receipts This Page (optional)	▶	40.23
TOTAL This Period (last page this line number only)	▶	19037.30

**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 142 / 156

<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
April 2010 bank charge

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: IL

District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B327974

Date of Disbursement

04 / 12 / 2010

Amount of Each Disbursement this Period

110.53

SUBTOTAL of Disbursements This Page (optional)

110.53

TOTAL This Period (last page this line number only)

110.53

**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)

PAGE 143 / 156

<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)
Moving America Forward PAC

Mailing Address 426 C Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

State: FL District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B328740

Date of Disbursement

04 / 30 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
The Grassley Committee

Mailing Address PO Box 1000

City Des Moines State IA Zip Code 50304

Purpose of Disbursement
Contribution

Candidate Name
Charles E Grassley

011
Category/
Type

Office Sought: House
 Senate
 President

State: IA District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B328739

Date of Disbursement

04 / 30 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Dan Seals for Congress

Mailing Address P.O. Box 584

City Wilmette State IL Zip Code 60091

Purpose of Disbursement
Contribution

Candidate Name
Dan Seals

011
Category/
Type

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B326688

Date of Disbursement

04 / 02 / 2010

Amount of Each Disbursement this Period

1000.00

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)

<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) Bill Foster for Congress	Transaction ID: B327752 Date of Disbursement
	Mailing Address 50 E Street SE Suite 1	<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name William G Foster	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Geoff Davis for Congress	Transaction ID: B327131 Date of Disbursement
	Mailing Address 700 12th Street NW Suite 700	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Geoff Davis	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress	Transaction ID: B327129 Date of Disbursement
	Mailing Address PO Box 75214	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20013	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Earl Pomeroy	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 145 / 156

<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)
Nebraska Republican Party-Fed Acct.

Mailing Address 1610 N Street

City Lincoln State NE Zip Code 68508

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

State: NE District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B327745
Date of Disbursement

04 / 16 / 2010

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Chris Lee for Congress

Mailing Address PO Box 15395

City Rochester State NY Zip Code 14615

Purpose of Disbursement
Contribution

Candidate Name
Christopher Lee

011
Category/
Type

Office Sought: House
 Senate
 President

State: NY District: 26

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B327132
Date of Disbursement

04 / 07 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Friends of Dan Maffei

Mailing Address 10 G Street NE Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name
Dan Maffei

011
Category/
Type

Office Sought: House
 Senate
 President

State: NY District: 25

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B328354
Date of Disbursement

04 / 27 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Pennsylvanians for Kanjorski

Mailing Address 1225 Eye St. NW Suite 1260

City Washington State DC Zip Code 20005

Purpose of Disbursement Contribution 011 Category/Type

Candidate Name Paul E Kanjorski

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: PA District: 11

Transaction ID: B327134
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Every Republican Is Crucial (ERICPAC)

Mailing Address 209 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: VA District: Not Applicable

Transaction ID: B328355
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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 147 / 156

<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) Lou Correa State Senate 2010 ID#1293209</p> <p>Mailing Address 1127 11th Street Ste 505</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement G-2010 State Senate 34 CA</p> <p>Candidate Name Lou Correa</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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B326125 Date of Disbursement 04 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) John A. Perez Assembly 2010 ID# 1314080</p> <p>Mailing Address 1201 K Street Suite 1220</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State House 46 CA</p> <p>Candidate Name John Perez</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) ▼</p>	<p>Transaction ID: B327127 Date of Disbursement 04 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Mary Hayashi for Assembly ID#1293240</p> <p>Mailing Address 1201 K Street Suite 606</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement G-2008 State House 18 CA</p> <p>Candidate Name Mary Hayashi</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: B224800 Date of Disbursement 04 / 20 / 2010</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>011 Category/ Type</p> <p>Voided: Original check dated 08/20/2008</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Tax Fighters for Anderson Senate 2010</p> <p>Mailing Address 8130 La Mesa Blvd. #202</p> <p>City La Mesa State CA Zip Code 91941</p> <p>Purpose of Disbursement O-2010 State Senate 36 CA</p> <p>Candidate Name Joel Anderson</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) ▼</p> <p>Office Holder Acct.</p>	<p>Transaction ID: B328367</p> <p>Date of Disbursement 04 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ronald Calderon Senate 2010 ID# 1292883</p> <p>Mailing Address 770 L Street #950</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement G-2010 State Senate 30 CA</p> <p>Candidate Name Ronald Calderon</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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B328368</p> <p>Date of Disbursement 04 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kevin De Leon Senate 2010 ID# 1323711</p> <p>Mailing Address 1100 O Street Suite 200</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State Senate 22 CA</p> <p>Candidate Name Kevin De Leon</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) ▼</p>	<p>Transaction ID: B328365</p> <p>Date of Disbursement 04 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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)
Mike Gatto for Assembly 2010 ID#1319224

Mailing Address 1100 O Street Suite 200

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
O-2010 State House 43 CA

Candidate Name
Mike Gatto

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
Special Run-off

State: District:

Transaction ID: B328362
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Roger Hernandez Assembly 2010 #1316190

Mailing Address 770 L Street #950

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
P-2010 State House 57 CA

Candidate Name
Roger Hernandez

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B328360
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Ricardo Lara Assembly 2010 ID#1316499

Mailing Address 1100 O Street Suite 200

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
P-2010 State House 50 CA

Candidate Name
Ricardo Lara

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B328359
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

A. Full Name (Last, First, Middle Initial)
Torres for Assembly 2010 ID# 1313989

Mailing Address 101 W. Mission Blvd. Ste. 11-320

City Pomona State CA Zip Code 91766

Purpose of Disbursement
P-2010 State House 61 CA

Candidate Name
Norma Torres

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B328357
Date of Disbursement

04 / 27 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Venables for Senate Cmte.

Mailing Address 116 Hearn Avenue

City Laurel State DE Zip Code 19956

Purpose of Disbursement
G-2008 State Senate 21 DE

Candidate Name
Robert Sr. Venables

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B239768
Date of Disbursement

04 / 20 / 2010

Amount of Each Disbursement this Period

-300.00

Voided: Original check dated 10/22/2008

C. Full Name (Last, First, Middle Initial)
Casey Cagle for Lt. Governor

Mailing Address P.O. Box 489

City Oakwood State GA Zip Code 30566

Purpose of Disbursement
P-2010 Lt. Governor GA

Candidate Name
L.S. Casey Cagle

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B292270
Date of Disbursement

04 / 20 / 2010

Amount of Each Disbursement this Period

-2300.00

Voided: Original check dated 09/23/2009

SUBTOTAL of Disbursements This Page (optional) ▶

-1600.00

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)
Committee to Elect Glenn Richardson

Mailing Address P.O. Box 1750

City Hiram State GA Zip Code 30141

Purpose of Disbursement
P-2010 State House 19 GA

Category/
Type

Candidate Name
Glenn Richardson

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B292276
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Voided: Original check dated 09/23/2009

B. Full Name (Last, First, Middle Initial)
Friends for Chip Rogers

Mailing Address 1025 Rose Creek Drive

City Woodstock State GA Zip Code 30189

Purpose of Disbursement
P-2010 State Senate 21 GA

Category/
Type

Candidate Name
Chip Rogers

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B292282
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Voided: Original check dated 09/23/2009

C. Full Name (Last, First, Middle Initial)
Committee to Elect James A. DeLeo

Mailing Address 6839 West Belmont Avenue

City Chicago State IL Zip Code 60634

Purpose of Disbursement
G-2010 State Senate 10 IL

Category/
Type

Candidate Name
James A DeLeo

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B243321
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Voided: Original check dated 12/04/2008

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)

<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.</p> <p>Full Name (Last, First, Middle Initial) Citizens for Sara Feigenholtz</p> <p>Mailing Address 3213 N. Wilton Avenue</p> <p>City Chicago State IL Zip Code 60657</p> <p>Purpose of Disbursement G-2010 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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B270125 Date of Disbursement 04 / 20 / 2010</p> <p>Amount of Each Disbursement this Period -500.00</p> <p>011 Category/ Type</p> <p>Voided: Original check dated 07/17/2009</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Citizens for Giannoulis</p> <p>Mailing Address PO Box 8588</p> <p>City Chicago State IL Zip Code 60680</p> <p>Purpose of Disbursement G-2010 State Treasurer IL</p> <p>Candidate Name Alexi Giannoulis</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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B243325 Date of Disbursement 04 / 20 / 2010</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>011 Category/ Type</p> <p>Voided: Original check dated 12/04/2008</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rep. Neil Abramson Campaign Fund</p> <p>Mailing Address 365 Canal Street</p> <p>City New Orleans State LA Zip Code 70130</p> <p>Purpose of Disbursement P-2011 State House 98 LA</p> <p>Candidate Name Neil Abramson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210332 Date of Disbursement 04 / 20 / 2010</p> <p>Amount of Each Disbursement this Period -250.00</p> <p>011 Category/ Type</p> <p>Voided: Original check dated 03/12/2008</p>

SUBTOTAL of Disbursements This Page (optional) ►

-1750.00

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)
MO Insurance Coalition PAC (MIC-PAC)

Mailing Address 220 Madison St.

City Jefferson City State MO Zip Code 65101

Purpose of Disbursement
State PAC

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Transaction ID: B328369

Date of Disbursement

04 / 27 / 2010

Amount of Each Disbursement this Period

1500.00

B. Full Name (Last, First, Middle Initial)
Jeff Delzer for State House

Mailing Address 2919 5th Street N.W.

City Underwood State ND Zip Code 58576

Purpose of Disbursement
G-2008 State House 08 ND

Candidate Name
Jeff W Delzer

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B234250

Date of Disbursement

04 / 20 / 2010

Amount of Each Disbursement this Period

-500.00

Voided: Original check dated 09/16/2008

C. Full Name (Last, First, Middle Initial)
Cmte to Elect Francis Wald

Mailing Address PO Box 926

City Dickinson State ND Zip Code 58601

Purpose of Disbursement
G-2010 State House 37 ND

Candidate Name
Francis J Wald

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B292131

Date of Disbursement

04 / 20 / 2010

Amount of Each Disbursement this Period

-300.00

Voided: Original check dated 09/22/2009

SUBTOTAL of Disbursements This Page (optional) ▶

700.00

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) Friends of Don White</p> <p>Mailing Address 638 School Road</p> <p>City Indiana State PA Zip Code 15701</p> <p>Purpose of Disbursement G-2012 State Senate 41 PA</p> <p>Candidate Name Donald C White</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B327128 Date of Disbursement 04 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Tom Dantzler Campaign Cmte.</p> <p>Mailing Address 208 Middleton Drive</p> <p>City Goose Creek State SC Zip Code 29445</p> <p>Purpose of Disbursement G-2008 State House 117 SC</p> <p>Candidate Name Tom Dantzler</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: B236706 Date of Disbursement 04 / 20 / 2010</p> <p>Amount of Each Disbursement this Period -250.00</p> <p>011 Category/ Type</p> <p>Voided: Original check dated 10/01/2008</p>
<p>C. Full Name (Last, First, Middle Initial) Robert S. Perry Jr. Campaign Cmte.</p> <p>Mailing Address PO Box 702</p> <p>City Aiken State SC Zip Code 29802</p> <p>Purpose of Disbursement G-2008 State House 81 SC</p> <p>Candidate Name Robert S Perry Jr.</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: B236708 Date of Disbursement 04 / 20 / 2010</p> <p>Amount of Each Disbursement this Period -250.00</p> <p>011 Category/ Type</p> <p>Voided: Original check dated 10/01/2008</p>

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

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) Dreyer for House	Transaction ID: B292146 Date of Disbursement 04 / 20 / 2010
	Mailing Address 2700 West Main Street	Amount of Each Disbursement this Period -100.00
	City Rapid City State SD Zip Code 57702	
	Purpose of Disbursement G-2010 State House 32 SD	011 Category/Type
	Candidate Name Brian Dreyer	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	Voided: Original check dated 09/23/2009

B.	Full Name (Last, First, Middle Initial) Kelly Hancock Campaign	Transaction ID: B241350 Date of Disbursement 04 / 20 / 2010
	Mailing Address 7708 Bridlewood Court	Amount of Each Disbursement this Period -1000.00
	City North Richland Hil State TX Zip Code 76180	
	Purpose of Disbursement G-2008 State House 91 TX	011 Category/Type
	Candidate Name Kelly Hancock	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	Voided: Original check dated 11/18/2008

C.	Full Name (Last, First, Middle Initial) Linda Harper-Brown Campaign	Transaction ID: B328356 Date of Disbursement 04 / 27 / 2010
	Mailing Address 100 Decker Court Suite 160A	Amount of Each Disbursement this Period 5000.00
	City Irving State TX Zip Code 75062	
	Purpose of Disbursement G-2010 State House 105 TX	011 Category/Type
	Candidate Name Linda Harper-Brown	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3900.00
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)
Cmte to Elect Rodney Anderson

Mailing Address P.O. Box 930

City Pine Bluffs State WY Zip Code 82082

Purpose of Disbursement
G-2010 State House 10 WY

Category/
Type

Candidate Name
Rodney Anderson

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B292156
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Voided: Original check dated 09/23/2009

B. Full Name (Last, First, Middle Initial)
Committee to Elect Cale Case

Mailing Address 787 South 4th Street

City Lander State WY Zip Code 82520

Purpose of Disbursement
G-2010 State Senate 25 WY

Category/
Type

Candidate Name
Cale Case

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B292171
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Voided: Original check dated 09/23/2009

C. Full Name (Last, First, Middle Initial)
Larson for Senate Committee

Mailing Address P.O. Box 3490

City Jackson State WY Zip Code 83001

Purpose of Disbursement
G-2010 State Senate 17 WY

Category/
Type

Candidate Name
Grant Larson

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B292173
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Voided: Original check dated 09/23/2009

SUBTOTAL of Disbursements This Page (optional) ▶

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