

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Allstate Insurance Company PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		50461.20
(b) Cash on Hand at Beginning of Reporting Period.....	45756.97	
(c) Total Receipts (from Line 19)	22936.47	68065.67
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	68693.44	118526.87
7. Total Disbursements (from Line 31).....	55090.42	104923.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	13603.02	13603.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Allstate Insurance Company PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13098.21	20914.05
(ii) Unitemized	9838.26	47151.62
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22936.47	68065.67
(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)	22936.47	68065.67
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	22936.47	68065.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	22936.47	68065.67

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	90.42	363.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	90.42	363.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	91500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	13060.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	55090.42	104923.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	55090.42	104923.85

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	22936.47	68065.67
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22936.47	68065.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	90.42	363.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	90.42	363.85

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

Form/Schedule: F3XN
Transaction ID :

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

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. JOHN P BADER
Full Name (Last, First, Middle Initial)
Mailing Address 438 MITCHELL DRIVE

City GRAYS LAKE	State IL	Zip Code 60030
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-ATO-Delivery & Risk M
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.75**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566549

Amount of Each Receipt this Period

81.15

B. JOHN P BADER
Full Name (Last, First, Middle Initial)
Mailing Address 438 MITCHELL DRIVE

City GRAYS LAKE	State IL	Zip Code 60030
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-ATO-Delivery & Risk M
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **486.90**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-566890

Amount of Each Receipt this Period

81.15

C. Donald J Bailey
Full Name (Last, First, Middle Initial)
Mailing Address 27 Kitchell Road

City Morristown	State NJ	Zip Code 07960
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation PRES-EB-Emerging Business
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **595.98**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566867

Amount of Each Receipt this Period

120.58

SUBTOTAL of Receipts This Page (optional).....▶	282.88
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. Donald J Bailey
 Mailing Address 27 Kitchell Road
 City State Zip Code
 Morristown NJ 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company PRES-EB-Emerging Business
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 718.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567205
 Amount of Each Receipt this Period
 122.31

Full Name (Last, First, Middle Initial)
B. 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 Occupation
 Allstate Insurance Company ATO-Manager-Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 200.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566755
 Amount of Each Receipt this Period
 40.49

Full Name (Last, First, Middle Initial)
C. 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 Occupation
 Allstate Insurance Company ATO-Manager-Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 241.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567096
 Amount of Each Receipt this Period
 41.04

SUBTOTAL of Receipts This Page (optional)..... ▶ 203.84
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 9 OF 90
(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. WILLIAM P BALLINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Blue Heron Way
 City Skillman State NJ Zip Code 08558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-PC-Agency Contact Cen
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.63

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-566939
 Amount of Each Receipt this Period 37.32

B. PHILLIP W BANET
 Full Name (Last, First, Middle Initial)
 Mailing Address 4589 JADE LANE
 City HOFFMAN ESTATES State IL Zip Code 60192
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.23

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-566976
 Amount of Each Receipt this Period 39.14

C. ROBERT H BARGE III III
 Full Name (Last, First, Middle Initial)
 Mailing Address 2222 LOCH WAY
 City EL DORADO HILLS State CA Zip Code 95762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 389.22

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566839
 Amount of Each Receipt this Period 78.78

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.24
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT H BARGE III III		Date of Receipt M M / D D / Y Y Y Y Y 03 / 22 / 2013 Transaction ID : A2013-567178
Mailing Address 2222 LOCH WAY		Amount of Each Receipt this Period 79.94
City EL DORADO HILLS	State CA	Zip Code 95762
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation SVP-SAL-Field Senior Vice	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 469.16	

Full Name (Last, First, Middle Initial) B. WALTER A BERKOWICZ		Date of Receipt M M / D D / Y Y Y Y Y 03 / 22 / 2013 Transaction ID : A2013-567064
Mailing Address 405 GATESHEAD DRIVE		Amount of Each Receipt this Period 36.23
City NAPERVILLE	State IL	Zip Code 60565
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AFT-Architect-Expert	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.13	

Full Name (Last, First, Middle Initial) C. EDWARD A BIEMER		Date of Receipt M M / D D / Y Y Y Y Y 03 / 08 / 2013 Transaction ID : A2013-566576
Mailing Address 807 Greenwood Ave.		Amount of Each Receipt this Period 42.04
City GLENCOE	State IL	Zip Code 60022
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation SVP-PRD-Regional Product	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.52	

SUBTOTAL of Receipts This Page (optional).....▶	158.21
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 SVP-PRD-Regional Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.98

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-566917

Amount of Each Receipt this Period
42.46

Full Name (Last, First, Middle Initial)
B. 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 Occupation
Allstate Insurance Company SVP-AF-Pres. Allstate Ben

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.10

Date of Receipt
03 / 08 / 2013
Transaction ID : A2013-566791

Amount of Each Receipt this Period
43.42

Full Name (Last, First, Middle Initial)
C. 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 Occupation
Allstate Insurance Company SVP-AF-Pres. Allstate Ben

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.52

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567131

Amount of Each Receipt this Period
43.42

SUBTOTAL of Receipts This Page (optional)..... ▶ 129.30

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: (check only one)	PAGE 12 OF 90
	<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. ROBERT L BLOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 398 Brookmont Lane
 City North Barrington State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-FSS-Investor Relation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 331.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566783
 Amount of Each Receipt this Period
 66.63

B. ROBERT L BLOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 398 Brookmont Lane
 City North Barrington State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-FSS-Investor Relation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 398.27

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567124
 Amount of Each Receipt this Period
 67.12

C. LONDON B BRADLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6350 S Langdale Way
 City Aurora State CO Zip Code 80016
 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 ▼ 218.91

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567158
 Amount of Each Receipt this Period
 37.25

SUBTOTAL of Receipts This Page (optional).....▶	171.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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

Full Name (Last, First, Middle Initial) A. LORRIE K BROUSE		Date of Receipt MM / DD / YYYY 03 / 22 / 2013 Transaction ID : A2013-566948
Mailing Address 223 POLK PLACE DRIVE		Amount of Each Receipt this Period 39.42
City FRANKLIN	State TN	Zip Code 37064
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Corporate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.05	

Full Name (Last, First, Middle Initial) B. CATHERINE S BRUNE		Date of Receipt MM / DD / YYYY 03 / 08 / 2013 Transaction ID : A2013-566612
Mailing Address 190 SAVANNA CT		Amount of Each Receipt this Period 188.46
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation EVP-SAL-Regional Presiden	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 942.30	

Full Name (Last, First, Middle Initial) C. CATHERINE S BRUNE		Date of Receipt MM / DD / YYYY 03 / 22 / 2013 Transaction ID : A2013-566953
Mailing Address 190 SAVANNA CT		Amount of Each Receipt this Period 188.46
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation EVP-SAL-Regional Presiden	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1130.76	

SUBTOTAL of Receipts This Page (optional).....▶	416.34
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 14 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 2514 SOUTH WESLEY AVE

City State Zip Code
 BERWYN IL 60402

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

Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 233.41

Date of Receipt
 03 / 22 / 2013
Transaction ID : A2013-567016

Amount of Each Receipt this Period
 39.48

Full Name (Last, First, Middle Initial)
B. 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 Occupation
 Allstate Insurance Company SVP-SAL-Field Senior Vice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 430.65

Date of Receipt
 03 / 08 / 2013
Transaction ID : A2013-566780

Amount of Each Receipt this Period
 87.09

Full Name (Last, First, Middle Initial)
C. 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 Occupation
 Allstate Insurance Company SVP-SAL-Field Senior Vice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 518.94

Date of Receipt
 03 / 22 / 2013
Transaction ID : A2013-567121

Amount of Each Receipt this Period
 88.29

SUBTOTAL of Receipts This Page (optional)..... ▶ 214.86

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 15 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

Full Name (Last, First, Middle Initial) A. SCOTT M CHRISTENSEN		Date of Receipt
Mailing Address 612 Wrightwood Terrace		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City State Zip Code Libertyville IL 60048		Transaction ID : A2013-566715
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="44.82"/>
Name of Employer Allstate Insurance Company	Occupation Senior Director Call Cent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="224.10"/>	

Full Name (Last, First, Middle Initial) B. SCOTT M CHRISTENSEN		Date of Receipt
Mailing Address 612 Wrightwood Terrace		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City State Zip Code Libertyville IL 60048		Transaction ID : A2013-567056
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="44.82"/>
Name of Employer Allstate Insurance Company	Occupation Senior Director Call Cent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="268.92"/>	

Full Name (Last, First, Middle Initial) C. Kathryn H Chucan		Date of Receipt
Mailing Address 21209 WEST YORKSHIRE DRIVE		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City State Zip Code KILDEER IL 60047		Transaction ID : A2013-566788
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="42.59"/>
Name of Employer Allstate Insurance Company	Occupation CE-Retention Analytics Di	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="212.11"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="132.23"/>
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: (check only one)	PAGE 16 OF 90
	<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. Kathryn H Chucan
Full Name (Last, First, Middle Initial)

Mailing Address 21209 WEST YORKSHIRE DRIVE

City KILDEER	State IL	Zip Code 60047
-----------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation CE-Retention Analytics Di
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.91

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-567129

Amount of Each Receipt this Period
42.80

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

Mailing Address 9330 Malheur Way

City ELK GROVE	State CA	Zip Code 95758
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Senior Attorney
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.47

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-567195

Amount of Each Receipt this Period
35.64

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

Mailing Address 4343 LAWN AVE

City WESTERN SPRINGS	State IL	Zip Code 60558
-------------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SMD-INV-International
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.40

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-566977

Amount of Each Receipt this Period
38.40

SUBTOTAL of Receipts This Page (optional).....▶	116.84
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 90
	<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. LISA D COCHRANE
Full Name (Last, First, Middle Initial)

Mailing Address 270 FAIRVIEW AVENUE

City WINNETKA State IL Zip Code 60093

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

Name of Employer Allstate Insurance Company Occupation SVP-MRK-Integrated Mrktng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567044

Amount of Each Receipt this Period
 38.18

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

Mailing Address 809 DUNHILL COURT

City GURNEE State IL Zip Code 60031

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566665

Amount of Each Receipt this Period
 49.32

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

Mailing Address 809 DUNHILL COURT

City GURNEE State IL Zip Code 60031

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567006

Amount of Each Receipt this Period
 50.41

SUBTOTAL of Receipts This Page (optional)..... ▶ 137.91

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: (check only one)	PAGE 18 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 28852 FOREST LAKE LANE

City GREEN OAKS State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation SVP-ATO-Bus Prtn-Sales &

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.20**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A2013-566546

Amount of Each Receipt this Period
62.92

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

Mailing Address 28852 FOREST LAKE LANE

City GREEN OAKS State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation SVP-ATO-Bus Prtn-Sales &

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.98**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-566887

Amount of Each Receipt this Period
63.78

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

Mailing Address 252 Center Point Lane

City Lansdale State PA Zip Code 19446

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.75**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A2013-566587

Amount of Each Receipt this Period
73.59

SUBTOTAL of Receipts This Page (optional)..... **200.29**

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: (check only one)	PAGE 19 OF 90
	<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. RICHARD C CRIST Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 252 Center Point Lane
City Lansdale State PA Zip Code 19446
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **439.88**

Date of Receipt **03 / 22 / 2013**
Transaction ID : A2013-566928
Amount of Each Receipt this Period **74.13**

B. ROBERT W DANIELS
Full Name (Last, First, Middle Initial)
Mailing Address 1020 Pleasant Street #1
City Oak Park State IL Zip Code 60302
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Corp Rel Director
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **236.08**

Date of Receipt **03 / 22 / 2013**
Transaction ID : A2013-566947
Amount of Each Receipt this Period **39.79**

C. RANDAL S DECOURSEY
Full Name (Last, First, Middle Initial)
Mailing Address 1954 Oakwood Dr
City Arlington Heights State IL Zip Code 60004
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-AF-Contact Center Impl
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **245.98**

Date of Receipt **03 / 08 / 2013**
Transaction ID : A2013-566667
Amount of Each Receipt this Period **49.98**

SUBTOTAL of Receipts This Page (optional)..... **163.90**
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 20 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 Occupation
 Allstate Insurance Company VP-AF-Contact Center Impl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **296.94**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-567008

Amount of Each Receipt this Period
50.96

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

Mailing Address 1320 MULBERRY LN.

City State Zip Code
 CARY IL 60013

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

Name of Employer Occupation
 Allstate Insurance Company ATO-Manager-Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **204.95**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A2013-566627

Amount of Each Receipt this Period
38.95

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

Mailing Address 1320 MULBERRY LN.

City State Zip Code
 CARY IL 60013

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

Name of Employer Occupation
 Allstate Insurance Company ATO-Manager-Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.24**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-566968

Amount of Each Receipt this Period
45.29

SUBTOTAL of Receipts This Page (optional)..... ▶ **135.20**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Occupation
Allstate Insurance Company VP-PRD-Product Vice Presi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.38

Date of Receipt
03 / 08 / 2013
Transaction ID : A2013-566752

Amount of Each Receipt this Period
55.74

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

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Occupation
Allstate Insurance Company VP-PRD-Product Vice Presi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
333.45

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567093

Amount of Each Receipt this Period
56.07

Full Name (Last, First, Middle Initial)
C. 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 Occupation
Allstate Insurance Company Claim-Sr Claim Field Dire

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.38

Date of Receipt
03 / 08 / 2013
Transaction ID : A2013-566623

Amount of Each Receipt this Period
47.54

SUBTOTAL of Receipts This Page (optional)..... ▶ 159.35

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 90
	<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. LORI A DESCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 12923 Freemont Peak Lane
 City Humble State TX Zip Code 77346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Claim-Sr Claim Field Dire
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566964
 Amount of Each Receipt this Period
 48.13

B. Victoria A Dinges
 Full Name (Last, First, Middle Initial)
 Mailing Address 421 Chapel Hill Lane
 City Northfield State IL Zip Code 60093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-CR-Public Social Respo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566858
 Amount of Each Receipt this Period
 58.23

C. Victoria A Dinges
 Full Name (Last, First, Middle Initial)
 Mailing Address 421 Chapel Hill Lane
 City Northfield State IL Zip Code 60093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-CR-Public Social Respo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.01

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567196
 Amount of Each Receipt this Period
 59.02

SUBTOTAL of Receipts This Page (optional).....▶	165.38
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 23 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 Occupation
 Allstate Insurance Company VP-AF-Annuity Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 301.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566731

Amount of Each Receipt this Period
 60.56

Full Name (Last, First, Middle Initial)
B. 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 Occupation
 Allstate Insurance Company VP-AF-Annuity Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 362.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567072

Amount of Each Receipt this Period
 60.86

Full Name (Last, First, Middle Initial)
C. Thomas V Ealy

Mailing Address 1541 West Wolfram Street

City State Zip Code
 Chicago IL 60657

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

Name of Employer Occupation
 Allstate Insurance Company SVP-ENC-President Encompa

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 404.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566873

Amount of Each Receipt this Period
 81.88

SUBTOTAL of Receipts This Page (optional)..... ▶ 203.30

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: (check only one)	PAGE 24 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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

Full Name (Last, First, Middle Initial) A. Thomas V Ealy		Date of Receipt MM / DD / YYYY 03 / 22 / 2013 Transaction ID : A2013-567211
Mailing Address 1541 West Wolfram Street		Amount of Each Receipt this Period 82.99
City Chicago	State IL	
Zip Code 60657		Aggregate Year-to-Date ▼ 487.95
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation SVP-ENC-President Encompa	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. KATHLEEN N ENRIGHT		Date of Receipt MM / DD / YYYY 03 / 08 / 2013 Transaction ID : A2013-566743
Mailing Address 10323 TRUMBULL AVE		Amount of Each Receipt this Period 41.95
City CHICAGO	State IL	
Zip Code 60655		Aggregate Year-to-Date ▼ 208.07
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-FSS-Accounting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. KATHLEEN N ENRIGHT		Date of Receipt MM / DD / YYYY 03 / 22 / 2013 Transaction ID : A2013-567084
Mailing Address 10323 TRUMBULL AVE		Amount of Each Receipt this Period 42.38
City CHICAGO	State IL	
Zip Code 60655		Aggregate Year-to-Date ▼ 250.45
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-FSS-Accounting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	167.32
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 25 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. MICHAEL L ESCOBAR
 Mailing Address 660 BALMORAL LANE
 City State Zip Code
 INVERNESS IL 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-HR-Diversity & Org. Ef
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 282.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566551
 Amount of Each Receipt this Period
 57.05

Full Name (Last, First, Middle Initial)
B. MICHAEL L ESCOBAR
 Mailing Address 660 BALMORAL LANE
 City State Zip Code
 INVERNESS IL 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-HR-Diversity & Org. Ef
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566892
 Amount of Each Receipt this Period
 57.69

Full Name (Last, First, Middle Initial)
C. 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 VP-AF-Chief of Staff & St
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567118
 Amount of Each Receipt this Period
 39.59

SUBTOTAL of Receipts This Page (optional)..... ▶ 154.33
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: (check only one)	PAGE 26 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 VP-Affinity Solutions Chi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.87

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013
Transaction ID : A2013-566676

Amount of Each Receipt this Period
49.07

Full Name (Last, First, Middle Initial)
B. 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 VP-Affinity Solutions Chi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.06

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013
Transaction ID : A2013-567017

Amount of Each Receipt this Period
50.19

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

Mailing Address 1280 WILD ROSE LANE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
Allstate Insurance Company VP-LGL-Allstate Financial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.06

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013
Transaction ID : A2013-566809

Amount of Each Receipt this Period
52.38

SUBTOTAL of Receipts This Page (optional)..... ▶ 151.64

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 1280 WILD ROSE LANE

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer Allstate Insurance Company Occupation VP-LGL-Allstate Financial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **312.89**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-567149

Amount of Each Receipt this Period
52.83

B. ANGELA FUSCO
Full Name (Last, First, Middle Initial)

Mailing Address 1199 E Port Clinton Road

City Vernon Hills State IL Zip Code 60061

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 ▼ **236.79**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-566929

Amount of Each Receipt this Period
41.22

C. NICK GEORGAKOPOULOS
Full Name (Last, First, Middle Initial)

Mailing Address 1129 N Mitchell Ave

City Arlington Heights State IL Zip Code 60004

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

Name of Employer Allstate Insurance Company Occupation Director FSS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.97**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-567039

Amount of Each Receipt this Period
39.01

SUBTOTAL of Receipts This Page (optional)..... **133.06**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 90
	<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. MARIBEL V GERSTNER
Full Name (Last, First, Middle Initial)
Mailing Address 2754 CHARLIE CT.
City GLENVIEW State IL Zip Code 60026
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-AF-Pres & Chief Operat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 233.97

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566661
Amount of Each Receipt this Period 48.09

B. MARIBEL V GERSTNER
Full Name (Last, First, Middle Initial)
Mailing Address 2754 CHARLIE CT.
City GLENVIEW State IL Zip Code 60026
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-AF-Pres & Chief Operat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 283.69

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567002
Amount of Each Receipt this Period 49.72

C. JOAN M GILMORE
Full Name (Last, First, Middle Initial)
Mailing Address 656 S BUCKINGHAM CT
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Director Litigation Servi
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 221.27

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566552
Amount of Each Receipt this Period 44.59

SUBTOTAL of Receipts This Page (optional)..... ▶ 142.40
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 29 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. JOAN M GILMORE

Mailing Address **656 S BUCKINGHAM CT**

City **LAKE FOREST** State **IL** Zip Code **60045**

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

Name of Employer **Allstate Insurance Company** Occupation **Director Litigation Servi**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **266.27**

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-566893

Amount of Each Receipt this Period
45.00

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

Mailing Address **4071 NEWPORT LANE**

City **ARLINGTON HTS** State **IL** Zip Code **60004**

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

Name of Employer **Allstate Insurance Company** Occupation **Senior Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **211.96**

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567182

Amount of Each Receipt this Period
35.86

Full Name (Last, First, Middle Initial)
C. Mark Green

Mailing Address **1711 Wildwood Ct**

City **Glenview** State **IL** Zip Code **60025**

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

Name of Employer **Allstate Insurance Company** Occupation **SVP-EB-President Ivantage**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **282.60**

Date of Receipt
03 / 08 / 2013
Transaction ID : A2013-566864

Amount of Each Receipt this Period
57.64

SUBTOTAL of Receipts This Page (optional)..... ▶ **138.50**

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 30 OF 90
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. Mark Green

Mailing Address 1711 Wildwood Ct

City State Zip Code
Glenview IL 60025

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

Name of Employer Occupation
Allstate Insurance Company SVP-EB-President Ivantage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
341.65

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567202

Amount of Each Receipt this Period
59.05

Full Name (Last, First, Middle Initial)
B. 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 EVP-INV-Chief Investment

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
353.64

Date of Receipt
03 / 08 / 2013
Transaction ID : A2013-566632

Amount of Each Receipt this Period
72.12

Full Name (Last, First, Middle Initial)
C. 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 EVP-INV-Chief Investment

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
427.49

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-566973

Amount of Each Receipt this Period
73.85

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.02

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

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

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

FOR LINE NUMBER: PAGE 31 OF 90
(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

Full Name (Last, First, Middle Initial)
A. 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 ▼
238.05

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567159

Amount of Each Receipt this Period
40.56

Full Name (Last, First, Middle Initial)
B. David S Harper

Mailing Address 41 Lancaster Lane

City State Zip Code
Lincolnshire IL 60069

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

Name of Employer Occupation
Allstate Insurance Company SVP-FSS-Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.44

Date of Receipt
03 / 08 / 2013
Transaction ID : A2013-566866

Amount of Each Receipt this Period
64.60

Full Name (Last, First, Middle Initial)
c. David S Harper

Mailing Address 41 Lancaster Lane

City State Zip Code
Lincolnshire IL 60069

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

Name of Employer Occupation
Allstate Insurance Company SVP-FSS-Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.68

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567204

Amount of Each Receipt this Period
65.24

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.40

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 32 OF 90
	<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. Barbara A Higgins
Full Name (Last, First, Middle Initial)
Mailing Address 2107 N Lakewood Ave
City Chicago State IL Zip Code 60614
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-PC-Customer Retention
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.81

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567218
Amount of Each Receipt this Period 36.92

B. WILLIAM G HILL
Full Name (Last, First, Middle Initial)
Mailing Address 2935 GLENARYE DRIVE
City LINDENHURST State IL Zip Code 60046
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation EVP-PRD-Regional Product
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 655.16

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566604
Amount of Each Receipt this Period 132.08

C. WILLIAM G HILL
Full Name (Last, First, Middle Initial)
Mailing Address 2935 GLENARYE DRIVE
City LINDENHURST State IL Zip Code 60046
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation EVP-PRD-Regional Product
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 788.54

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-566945
Amount of Each Receipt this Period 133.38

SUBTOTAL of Receipts This Page (optional)..... ▶ 302.38
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 90
	<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. LINDA M HONOUR
Full Name (Last, First, Middle Initial)

Mailing Address 464 Washington 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-ATO-Prog Mgmt Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.70**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A2013-566854

Amount of Each Receipt this Period
46.14

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

Mailing Address 464 Washington 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-ATO-Prog Mgmt Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.84**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-567192

Amount of Each Receipt this Period
46.14

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

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 VP-LGL-Corporate Law

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **271.01**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A2013-566699

Amount of Each Receipt this Period
55.17

SUBTOTAL of Receipts This Page (optional)..... ▶ **147.45**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 VP-LGL-Corporate Law

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.39

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013
Transaction ID : A2013-567040

Amount of Each Receipt this Period
56.38

Full Name (Last, First, Middle Initial)
B. 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 SPS-Strategic Alliance-Di

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.01

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013
Transaction ID : A2013-566993

Amount of Each Receipt this Period
39.92

Full Name (Last, First, Middle Initial)
C. Marcia Kaminsky

Mailing Address 2634 North Wayne

City State Zip Code
Chicago IL 60614

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

Name of Employer Occupation
Allstate Insurance Company SVP-CR-Corporate Communic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.56

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013
Transaction ID : A2013-566874

Amount of Each Receipt this Period
70.88

SUBTOTAL of Receipts This Page (optional)..... ▶ 167.18

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Marcia Kaminsky		Date of Receipt
Mailing Address 2634 North Wayne		M M M / D D D / Y Y Y Y Y Y 03 / 22 / 2013
City	State	Zip Code
Chicago	IL	60614
FEC ID number of contributing federal political committee. C		Transaction ID : A2013-567212
Name of Employer Allstate Insurance Company		Amount of Each Receipt this Period
Occupation SVP-CR-Corporate Communic		71.85
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	422.41	

Full Name (Last, First, Middle Initial) B. Wilford J Kavanaugh		Date of Receipt
Mailing Address 7 Open Parkway North		M M M / D D D / Y Y Y Y Y Y 03 / 08 / 2013
City	State	Zip Code
Hawthorn Woods	IL	60047
FEC ID number of contributing federal political committee. C		Transaction ID : A2013-566877
Name of Employer Allstate Insurance Company		Amount of Each Receipt this Period
Occupation SVP-AF-Pres. Allstate Fin		55.85
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	279.25	

Full Name (Last, First, Middle Initial) C. Wilford J Kavanaugh		Date of Receipt
Mailing Address 7 Open Parkway North		M M M / D D D / Y Y Y Y Y Y 03 / 22 / 2013
City	State	Zip Code
Hawthorn Woods	IL	60047
FEC ID number of contributing federal political committee. C		Transaction ID : A2013-567215
Name of Employer Allstate Insurance Company		Amount of Each Receipt this Period
Occupation SVP-AF-Pres. Allstate Fin		55.85
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	335.10	

SUBTOTAL of Receipts This Page (optional).....▶	183.55
TOTAL This Period (last page this line 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 36 OF 90
	<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. CHRISTOPHER R KIAH
 Full Name (Last, First, Middle Initial)
 Mailing Address 221 BRAMPTON LN
 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-PRT-Protection Progra
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566541
 Amount of Each Receipt this Period
 55.73

B. CHRISTOPHER R KIAH
 Full Name (Last, First, Middle Initial)
 Mailing Address 221 BRAMPTON LN
 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-PRT-Protection Progra
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.19

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566882
 Amount of Each Receipt this Period
 56.46

C. CURTIS L KIBLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1332 BAY MEADOWS DR
 City BARTLETT State IL Zip Code 60103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Manager-Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566653
 Amount of Each Receipt this Period
 43.45

SUBTOTAL of Receipts This Page (optional).....▶	155.64
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 90
	<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

Full Name (Last, First, Middle Initial) A. CURTIS L KIBLER		Date of Receipt
Mailing Address 1332 BAY MEADOWS DR		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
BARTLETT	IL	60103
FEC ID number of contributing federal political committee.		Transaction ID : A2013-566994
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="43.67"/>
Name of Employer	Occupation	
Allstate Insurance Company	ATO-Manager-Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.08"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JEFFREY D KNIPP		Date of Receipt
Mailing Address 2050 GLENDALE AVE		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
NORTHBROOK	IL	60062
FEC ID number of contributing federal political committee.		Transaction ID : A2013-567156
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="37.39"/>
Name of Employer	Occupation	
Allstate Insurance Company	Operations Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="219.43"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. PHILLIP E LAWSON		Date of Receipt
Mailing Address 1050 Lake Carolyn Parkway		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
Irving	TX	75039
FEC ID number of contributing federal political committee.		Transaction ID : A2013-566822
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="87.16"/>
Name of Employer	Occupation	
Allstate Insurance Company	SVP-SAL-Field Senior Vice	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="429.80"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="168.22"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 38 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. PHILLIP E LAWSON
Mailing Address 1050 Lake Carolyn Parkway
City State Zip Code
Irving TX 75039
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Allstate Insurance Company SVP-SAL-Field Senior Vice
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
518.45

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013
Transaction ID : A2013-567162
Amount of Each Receipt this Period
88.65

Full Name (Last, First, Middle Initial)
B. SUSAN L LEES
Mailing Address 1705 DARTMOUTH LN
City State Zip Code
DEERFIELD IL 60015
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Allstate Insurance Company EVP-LGL-Chief Legal Offic
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
248.79

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013
Transaction ID : A2013-566540
Amount of Each Receipt this Period
50.31

Full Name (Last, First, Middle Initial)
C. SUSAN L LEES
Mailing Address 1705 DARTMOUTH LN
City State Zip Code
DEERFIELD IL 60015
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Allstate Insurance Company EVP-LGL-Chief Legal Offic
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
299.79

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013
Transaction ID : A2013-566881
Amount of Each Receipt this Period
51.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **189.96**
TOTAL This Period (last page this line 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 39 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. Peter G Logothesis
Full Name (Last, First, Middle Initial)
Mailing Address 2326 Indian Ridge Drive
City Glenview State IL Zip Code 60026
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-ATO-Bus Prtn-Claims
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.90**

Date of Receipt **03 / 08 / 2013**
Transaction ID : A2013-566878
Amount of Each Receipt this Period **60.90**

B. Peter G Logothesis
Full Name (Last, First, Middle Initial)
Mailing Address 2326 Indian Ridge Drive
City Glenview State IL Zip Code 60026
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-ATO-Bus Prtn-Claims
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **362.70**

Date of Receipt **03 / 22 / 2013**
Transaction ID : A2013-567216
Amount of Each Receipt this Period **61.80**

C. GREGORY J LUCETT
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 9242
City GLENDALE State CA Zip Code 91226
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Managing Attorney
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **209.11**

Date of Receipt **03 / 22 / 2013**
Transaction ID : A2013-567184
Amount of Each Receipt this Period **35.76**

SUBTOTAL of Receipts This Page (optional)..... **158.46**
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 40 OF 90
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. BENJAMIN E LUMICAO
 Full Name (Last, First, Middle Initial)
 Mailing Address 9655 Woods Drive Unit 708
 City Skokie State IL Zip Code 60077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567074
 Amount of Each Receipt this Period
 34.83

B. Katherine A Mabe
 Full Name (Last, First, Middle Initial)
 Mailing Address 1801 Tower Drive
 City Glenview State IL Zip Code 60026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-SAL-Regional Presiden
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 532.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566875
 Amount of Each Receipt this Period
 107.75

C. Katherine A Mabe
 Full Name (Last, First, Middle Initial)
 Mailing Address 1801 Tower Drive
 City Glenview State IL Zip Code 60026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-SAL-Regional Presiden
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 641.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567213
 Amount of Each Receipt this Period
 109.34

SUBTOTAL of Receipts This Page (optional).....▶	251.92
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: (check only one)	PAGE 41 OF 90
	<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. MARY J MC GINN
Full Name (Last, First, Middle Initial)

Mailing Address 155 BUCKLEY ROAD

City BARRINGTON HILL State IL Zip Code 60010

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.24

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566720

Amount of Each Receipt this Period 85.56

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

Mailing Address 155 BUCKLEY ROAD

City BARRINGTON HILL State IL Zip Code 60010

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 511.44

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567061

Amount of Each Receipt this Period 86.20

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

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 Corporate Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 209.06

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566680

Amount of Each Receipt this Period 41.98

SUBTOTAL of Receipts This Page (optional)..... ▶ 213.74

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: (check only one)	PAGE 42 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. JOHN A MC LAUGHLIN
Full Name (Last, First, Middle Initial)
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 Corporate Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.25

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567021
Amount of Each Receipt this Period 42.19

B. EVA M MCINTEE
Full Name (Last, First, Middle Initial)
Mailing Address 11 Larkspur Drive
City Smithtown State NY Zip Code 11787
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-SAL-Field Vice Preside
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 222.50

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566830
Amount of Each Receipt this Period 44.90

C. EVA M MCINTEE
Full Name (Last, First, Middle Initial)
Mailing Address 11 Larkspur Drive
City Smithtown State NY Zip Code 11787
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-SAL-Field Vice Preside
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 267.90

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567169
Amount of Each Receipt this Period 45.40

SUBTOTAL of Receipts This Page (optional)..... ▶ 132.49
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 43 OF 90
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Jesse E Merten
Full Name (Last, First, Middle Initial)
Mailing Address 3311 Brook Rd.
City Highland Park State IL Zip Code 60035
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-AF-Finance
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **318.80**

Date of Receipt **03 / 08 / 2013**
Transaction ID : A2013-566879
Amount of Each Receipt this Period **64.96**

B. Jesse E Merten
Full Name (Last, First, Middle Initial)
Mailing Address 3311 Brook Rd.
City Highland Park State IL Zip Code 60035
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-AF-Finance
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **385.26**

Date of Receipt **03 / 22 / 2013**
Transaction ID : A2013-567217
Amount of Each Receipt this Period **66.46**

C. MEGHAN O MULVIHILL
Full Name (Last, First, Middle Initial)
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 Corporate Counsel
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **232.15**

Date of Receipt **03 / 22 / 2013**
Transaction ID : A2013-566941
Amount of Each Receipt this Period **39.27**

SUBTOTAL of Receipts This Page (optional)..... **170.69**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 90
	<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. MICHAEL F MULVIHILL
 Full Name (Last, First, Middle Initial)
 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 Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-56658
 Amount of Each Receipt this Period
 42.93

B. MICHAEL F MULVIHILL
 Full Name (Last, First, Middle Initial)
 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 Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-56699
 Amount of Each Receipt this Period
 43.57

C. MICHAEL A MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1908 N. Silver Lake Road
 City Arlington Heights State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-56680
 Amount of Each Receipt this Period
 41.78

SUBTOTAL of Receipts This Page (optional)..... ▶ 128.28
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 90
	<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. MICHAEL A MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 1908 N. Silver Lake Road

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.05

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567146

Amount of Each Receipt this Period
41.99

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

Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
317.11

Date of Receipt
03 / 08 / 2013
Transaction ID : A2013-566754

Amount of Each Receipt this Period
64.31

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

Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
382.52

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567095

Amount of Each Receipt this Period
65.41

SUBTOTAL of Receipts This Page (optional)..... ▶ 171.71

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 46 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 SVP-LGL-Enterprise Busine

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
299.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566808

Amount of Each Receipt this Period
60.54

Full Name (Last, First, Middle Initial)
B. 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 SVP-LGL-Enterprise Busine

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.53

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567148

Amount of Each Receipt this Period
61.43

Full Name (Last, First, Middle Initial)
C. ROGER D ODLE 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 Occupation
Allstate Insurance Company Prod Ops Sr State Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.03

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566726

Amount of Each Receipt this Period
46.15

SUBTOTAL of Receipts This Page (optional)..... ▶ 168.12

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. ROGER D ODLE II
 Full Name (Last, First, Middle Initial)
 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 Occupation
 Allstate Insurance Company Prod Ops Sr State Mgr
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 274.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567067
 Amount of Each Receipt this Period
 46.84

B. KENNETH I OMURA
 Full Name (Last, First, Middle Initial)
 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 Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 203.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566631
 Amount of Each Receipt this Period
 40.87

C. KENNETH I OMURA
 Full Name (Last, First, Middle Initial)
 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 Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 244.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566972
 Amount of Each Receipt this Period
 41.07

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 48 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 VP-CLM-Claims Product Lin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 241.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566624

Amount of Each Receipt this Period
 48.70

Full Name (Last, First, Middle Initial)
B. 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 VP-CLM-Claims Product Lin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 290.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566965

Amount of Each Receipt this Period
 49.30

Full Name (Last, First, Middle Initial)
C. 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 VP-LGL-Legislative & Regu

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 239.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566596

Amount of Each Receipt this Period
 48.94

SUBTOTAL of Receipts This Page (optional)..... ▶ 146.94

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: (check only one)	PAGE 49 OF 90
	<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. DEAN T PAPPAS
Full Name (Last, First, Middle Initial)
Mailing Address 3406 VICEROY COURT

City EDGEWATER	State MD	Zip Code 21037
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **289.71**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-566937

Amount of Each Receipt this Period

50.25

B. LAURIE PELLOUCHOUD
Full Name (Last, First, Middle Initial)
Mailing Address 1447 PLEASANT

City GLENVIEW	State IL	Zip Code 60025
------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-PRD-Homeowners
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **214.08**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566749

Amount of Each Receipt this Period

43.56

C. LAURIE PELLOUCHOUD
Full Name (Last, First, Middle Initial)
Mailing Address 1447 PLEASANT

City GLENVIEW	State IL	Zip Code 60025
------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-PRD-Homeowners
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **258.58**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-567090

Amount of Each Receipt this Period

44.50

SUBTOTAL of Receipts This Page (optional).....▶	138.31
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 90
	<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. THOMAS S PETERSON
Full Name (Last, First, Middle Initial)

Mailing Address 2756 BRECKENRIDGE LANE

City NAPERVILLE State IL Zip Code 60565

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

Name of Employer Allstate Insurance Company Occupation ATO-Manager-Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.31

Date of Receipt 03 / 22 / 2013
Transaction ID : **A2013-567194**

Amount of Each Receipt this Period 34.60

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

Mailing Address 2114 W Cortland ST

City CHICAGO State IL Zip Code 60647

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

Name of Employer Allstate Insurance Company Occupation SVP-INV-Chief Financial O

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.50

Date of Receipt 03 / 08 / 2013
Transaction ID : **A2013-566647**

Amount of Each Receipt this Period 67.70

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

Mailing Address 2114 W Cortland ST

City CHICAGO State IL Zip Code 60647

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

Name of Employer Allstate Insurance Company Occupation SVP-INV-Chief Financial O

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 406.20

Date of Receipt 03 / 22 / 2013
Transaction ID : **A2013-566988**

Amount of Each Receipt this Period 67.70

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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

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

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

FOR LINE NUMBER: PAGE 51 OF 90
(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. DAVID J PRENDERGAST
 Full Name (Last, First, Middle Initial)
 Mailing Address 8262 Arrowleaf Turn
 City Gainesville State VA Zip Code 20155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.69

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566557
 Amount of Each Receipt this Period
 59.13

B. DAVID J PRENDERGAST
 Full Name (Last, First, Middle Initial)
 Mailing Address 8262 Arrowleaf Turn
 City Gainesville State VA Zip Code 20155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 366.27

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566898
 Amount of Each Receipt this Period
 60.58

C. JORGE A QUEZADA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1407 W. GROVE ST
 City ARLINGTON HGTS State IL Zip Code 60005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation HR-Inclusive Diversity-Di
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.85

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567183
 Amount of Each Receipt this Period
 37.80

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.51
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. MARY J QUINN
Full Name (Last, First, Middle Initial)

Mailing Address 837 S. CHESTNUT AVENUE

City ARLINGTON HEIGH	State IL	Zip Code 60005
-------------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Corporate Counsel
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.89**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566776

Amount of Each Receipt this Period

44.65

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

Mailing Address 837 S. CHESTNUT AVENUE

City ARLINGTON HEIGH	State IL	Zip Code 60005
-------------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Corporate Counsel
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **266.89**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-567117

Amount of Each Receipt this Period

45.00

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

Mailing Address 618 Burdick St.

City LIBERTYVILLE	State IL	Zip Code 60048
----------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation ATO-Manager-Director
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.25**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566685

Amount of Each Receipt this Period

40.73

SUBTOTAL of Receipts This Page (optional).....▶	130.38
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 90
	<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. KEVIN P RICE
Full Name (Last, First, Middle Initial)

Mailing Address 618 Burdick St.

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation ATO-Manager-Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567026

Amount of Each Receipt this Period
 41.33

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

Mailing Address 5926 W. 90TH PLACE

City OAK LAWN State IL Zip Code 60453

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

Name of Employer Allstate Insurance Company Occupation SVP-FSS-Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 283.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566689

Amount of Each Receipt this Period
 57.74

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

Mailing Address 5926 W. 90TH PLACE

City OAK LAWN State IL Zip Code 60453

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

Name of Employer Allstate Insurance Company Occupation SVP-FSS-Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.63

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567030

Amount of Each Receipt this Period
 59.01

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: (check only one)	PAGE 54 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. THEODORE ROBERTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 Waverly Circle
 City Phoenixville State PA Zip Code 19460
 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 ▼ 226.76

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567161
 Amount of Each Receipt this Period 38.64

B. GREGORY C ROHLFING
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 ASHLAND
 City RIVER FOREST State IL Zip Code 60305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.33

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566645
 Amount of Each Receipt this Period 44.53

C. GREGORY C ROHLFING
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 ASHLAND
 City RIVER FOREST State IL Zip Code 60305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.19

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-566986
 Amount of Each Receipt this Period 44.86

SUBTOTAL of Receipts This Page (optional)..... ▶ 128.03
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. James B Rosseau
Full Name (Last, First, Middle Initial)

Mailing Address 10 N. Sycamore Avenue

City Aldan	State PA	Zip Code 19018
---------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-EB-Affinity
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.20**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566876

Amount of Each Receipt this Period

61.20

B. James B Rosseau
Full Name (Last, First, Middle Initial)

Mailing Address 10 N. Sycamore Avenue

City Aldan	State PA	Zip Code 19018
---------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-EB-Affinity
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **363.60**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-567214

Amount of Each Receipt this Period

62.40

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

Mailing Address 3371 VENARD RD.

City DOWNERS GROVE	State IL	Zip Code 60515
-----------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation ATO-Manager-Director
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.86**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566725

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional).....▶	165.26
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 56 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 Occupation
 Allstate Insurance Company ATO-Manager-Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 248.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567066
 Amount of Each Receipt this Period
 42.28

Full Name (Last, First, Middle Initial)
B. PAUL R RYSKE
 Mailing Address 898 LONGWOOD DR.
 City State Zip Code
 LAKE FOREST IL 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 219.54

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566643
 Amount of Each Receipt this Period
 44.26

Full Name (Last, First, Middle Initial)
C. PAUL R RYSKE
 Mailing Address 898 LONGWOOD DR.
 City State Zip Code
 LAKE FOREST IL 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 264.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566984
 Amount of Each Receipt this Period
 44.70

SUBTOTAL of Receipts This Page (optional)..... ▶ 131.24
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 90
	<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. Donald D Sands
Full Name (Last, First, Middle Initial)
Mailing Address 321 North Brainard Avenue
City Lagrange Park State IL Zip Code 60526
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior Strategy Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.86

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566869
Amount of Each Receipt this Period 53.54

B. Donald D Sands
Full Name (Last, First, Middle Initial)
Mailing Address 321 North Brainard Avenue
City Lagrange Park State IL Zip Code 60526
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior Strategy Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 319.86

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567207
Amount of Each Receipt this Period 54.00

C. PATRICK J SCHNEIDER
Full Name (Last, First, Middle Initial)
Mailing Address 210 NORTH TRAIL
City HAWTHORN WOODS State IL Zip Code 60047
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation ATO-Manager-Sr Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 214.47

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567070
Amount of Each Receipt this Period 36.54

SUBTOTAL of Receipts This Page (optional)..... ▶ 144.08
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 58 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 VP-HR-HR Business Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 289.37

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566583

Amount of Each Receipt this Period
 58.33

Full Name (Last, First, Middle Initial)
B. 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 VP-HR-HR Business Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 348.28

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566924

Amount of Each Receipt this Period
 58.91

Full Name (Last, First, Middle Initial)
C. PAUL SCHUTT

Mailing Address 6323 N. NORMANDY

City State Zip Code
 CHICAGO IL 60631

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

Name of Employer Occupation
 Allstate Insurance Company VP-INV-Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 271.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566688

Amount of Each Receipt this Period
 54.20

SUBTOTAL of Receipts This Page (optional)..... ▶ 171.44

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 90
	<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. PAUL SCHUTT
Full Name (Last, First, Middle Initial)

Mailing Address 6323 N. NORMANDY

City CHICAGO	State IL	Zip Code 60631
-----------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-INV-Finance
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.20**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-567029

Amount of Each Receipt this Period

54.20

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

Mailing Address 128 Waverly Circle

City Phoenixville	State PA	Zip Code 19460
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **263.61**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566784

Amount of Each Receipt this Period

52.93

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

Mailing Address 128 Waverly Circle

City Phoenixville	State PA	Zip Code 19460
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.81**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-567125

Amount of Each Receipt this Period

53.20

SUBTOTAL of Receipts This Page (optional).....▶	160.33
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: (check only one)	PAGE 60 OF 90
	<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. STACY Y SHARPE
Full Name (Last, First, Middle Initial)
Mailing Address 616 E Street NW #649

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566719

Amount of Each Receipt this Period
47.43

B. STACY Y SHARPE
Full Name (Last, First, Middle Initial)
Mailing Address 616 E Street NW #649

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-567060

Amount of Each Receipt this Period
48.13

C. STEVEN E SHEBIK
Full Name (Last, First, Middle Initial)
Mailing Address 517 ROBINWOOD LANE

City WHEATON	State IL	Zip Code 60189
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
692.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566695

Amount of Each Receipt this Period
138.46

SUBTOTAL of Receipts This Page (optional).....▶	234.02
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 90
	<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

Full Name (Last, First, Middle Initial) A. STEVEN E SHEBIK		Date of Receipt
Mailing Address 517 ROBINWOOD LANE		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Transaction ID : A2013-567036
WHEATON	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="138.46"/>
Name of Employer	Occupation	
Allstate Insurance Company	SMT-FSS-Chief Financial O	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="830.76"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ROBERT L SIMMONS		Date of Receipt
Mailing Address 1146 39th Ave NE		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Transaction ID : A2013-566915
St Petersburg	FL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="35.65"/>
Name of Employer	Occupation	
Allstate Insurance Company	Corporate Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="209.22"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. KIMBALL S SIMON		Date of Receipt
Mailing Address 11 WEHRHEIM		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Transaction ID : A2013-566824
BARRINGTON	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="41.53"/>
Name of Employer	Occupation	
Allstate Insurance Company	ATO-Manager-Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="206.41"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="215.64"/>
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 62 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 Occupation
Allstate Insurance Company ATO-Manager-Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
248.25

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567164

Amount of Each Receipt this Period
41.84

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

Mailing Address 650 Rochelle Terrace

City State Zip Code
LOMBARD IL 60148

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

Name of Employer Occupation
Allstate Insurance Company Risk Management Senior Di

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.27

Date of Receipt
03 / 08 / 2013
Transaction ID : A2013-566711

Amount of Each Receipt this Period
44.75

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

Mailing Address 650 Rochelle Terrace

City State Zip Code
LOMBARD IL 60148

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

Name of Employer Occupation
Allstate Insurance Company Risk Management Senior Di

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.90

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567052

Amount of Each Receipt this Period
45.63

SUBTOTAL of Receipts This Page (optional)..... ▶ 132.22

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: (check only one)	PAGE 63 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. CHARLES M SMITH
 Full Name (Last, First, Middle Initial)
 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 Occupation
 Allstate Insurance Company Senior Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 219.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567128
 Amount of Each Receipt this Period
 36.98

B. RANDALL D SNITTJER
 Full Name (Last, First, Middle Initial)
 Mailing Address 11423 E. Blue Sky Drive
 City State Zip Code
 Scottsdale AZ 85262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Controller
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 219.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567157
 Amount of Each Receipt this Period
 36.94

C. STEVEN P SORENSON
 Full Name (Last, First, Middle Initial)
 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 Occupation
 Allstate Insurance Company EVP-PRD-Product Operation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 445.91

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566778
 Amount of Each Receipt this Period
 90.07

SUBTOTAL of Receipts This Page (optional).....▶	163.99
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 64 OF 90
	<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. STEVEN P SORENSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 20712 High Ridge Dr
 City KILDEER State IL Zip Code 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-PRD-Product Operation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 537.10

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567119
 Amount of Each Receipt this Period 91.19

B. KEVIN A SPATARO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1663 SARATOGA LANE
 City GLENVIEW State IL Zip Code 60026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-FSS-Accounting Resear
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.80

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567086
 Amount of Each Receipt this Period 38.67

C. EDWIN M SPECHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 AMBRIA DRIVE
 City MUNDELEIN State IL Zip Code 60060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation HR-Sales Comp-Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.30

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566594
 Amount of Each Receipt this Period 40.22

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.08
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 65 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 Occupation
 Allstate Insurance Company HR-Sales Comp-Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.72

Date of Receipt
 03 / 22 / 2013
Transaction ID : A2013-566935

Amount of Each Receipt this Period
 40.42

Full Name (Last, First, Middle Initial)
B. 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 Occupation
 Allstate Insurance Company VP-AF-Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 291.92

Date of Receipt
 03 / 08 / 2013
Transaction ID : A2013-566634

Amount of Each Receipt this Period
 59.32

Full Name (Last, First, Middle Initial)
C. 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 Occupation
 Allstate Insurance Company VP-AF-Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 352.40

Date of Receipt
 03 / 22 / 2013
Transaction ID : A2013-566975

Amount of Each Receipt this Period
 60.48

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.22

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 66 OF 90
(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. EMORY D STEPHENS Jr.
 Full Name (Last, First, Middle Initial)
 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 Occupation
 Allstate Insurance Company VP-FSS-Accounting
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 217.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566610
 Amount of Each Receipt this Period
 44.04

B. EMORY D STEPHENS Jr.
 Full Name (Last, First, Middle Initial)
 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 Occupation
 Allstate Insurance Company VP-FSS-Accounting
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 262.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566951
 Amount of Each Receipt this Period
 44.70

C. GARY S STERE
 Full Name (Last, First, Middle Initial)
 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 Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 214.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566619
 Amount of Each Receipt this Period
 43.34

SUBTOTAL of Receipts This Page (optional)..... ► 132.08
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: (check only one)	PAGE 67 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City ATLANTIC BEACH State FL Zip Code 32233

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **258.75**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-566960

Amount of Each Receipt this Period
43.77

Full Name (Last, First, Middle Initial)
B. 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 SVP-FSS-Internal Auditing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **306.99**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A2013-566650

Amount of Each Receipt this Period
62.07

Full Name (Last, First, Middle Initial)
C. 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 SVP-FSS-Internal Auditing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **369.91**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-566991

Amount of Each Receipt this Period
62.92

SUBTOTAL of Receipts This Page (optional)..... **168.76**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 90
	<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. WILLIAM J THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 5129 Pine River Trail

City Castle Rock State CO Zip Code 80108

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **246.74**

Date of Receipt **03 / 08 / 2013**
Transaction ID : A2013-566608

Amount of Each Receipt this Period **49.94**

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

Mailing Address 5129 Pine River Trail

City Castle Rock State CO Zip Code 80108

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **297.42**

Date of Receipt **03 / 22 / 2013**
Transaction ID : A2013-566949

Amount of Each Receipt this Period **50.68**

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

Mailing Address 5430 TALL OAKS DRIVE

City LONG GROVE State IL Zip Code 60047

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **266.57**

Date of Receipt **03 / 08 / 2013**
Transaction ID : A2013-566797

Amount of Each Receipt this Period **53.85**

SUBTOTAL of Receipts This Page (optional)..... **154.47**

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

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

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

FOR LINE NUMBER: PAGE 69 OF 90
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. 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 Occupation
 Allstate Insurance Company VP-SAL-Sales Programs

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 321.08

Date of Receipt
 03 / 22 / 2013
Transaction ID : A2013-567137

Amount of Each Receipt this Period
 54.51

Full Name (Last, First, Middle Initial)
B. 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 SVP-LGL-Government & Indu

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 312.83

Date of Receipt
 03 / 08 / 2013
Transaction ID : A2013-566692

Amount of Each Receipt this Period
 63.19

Full Name (Last, First, Middle Initial)
C. 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 SVP-LGL-Government & Indu

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 376.80

Date of Receipt
 03 / 22 / 2013
Transaction ID : A2013-567033

Amount of Each Receipt this Period
 63.97

SUBTOTAL of Receipts This Page (optional)..... ▶ 181.67

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 70 OF 90
(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. WILLIAM P VANDERBORG
Full Name (Last, First, Middle Initial)
Mailing Address 561 W CROOKED STICK CT
City VERNON HILLS State IL Zip Code 60061
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 ▼ 207.89

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-566990
Amount of Each Receipt this Period 34.91

B. PATRICIA C VANLAMMEREN
Full Name (Last, First, Middle Initial)
Mailing Address 2800 Birchwood Avenue
City Wilmette State IL Zip Code 60091
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-MRK-Customer Exp & Re
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 342.63

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566823
Amount of Each Receipt this Period 69.35

C. PATRICIA C VANLAMMEREN
Full Name (Last, First, Middle Initial)
Mailing Address 2800 Birchwood Avenue
City Wilmette State IL Zip Code 60091
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP-MRK-Customer Exp & Re
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 413.01

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567163
Amount of Each Receipt this Period 70.38

SUBTOTAL of Receipts This Page (optional)..... ▶ 174.64
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 90
	<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. RICHARD VAVRA
Full Name (Last, First, Middle Initial)

Mailing Address 2514 S WESLEY AVENUE

City BERWYN State IL Zip Code 60402

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566644

Amount of Each Receipt this Period
 43.46

B. RICHARD VAVRA
Full Name (Last, First, Middle Initial)

Mailing Address 2514 S WESLEY AVENUE

City BERWYN State IL Zip Code 60402

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 259.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-566985

Amount of Each Receipt this Period
 43.89

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

Mailing Address 37144 FOX HILL DR

City WADSWORTH State IL Zip Code 60083

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 686.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566569

Amount of Each Receipt this Period
 138.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 226.04

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 OF 90
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 37144 FOX HILL DR

City WADSWORTH State IL Zip Code 60083

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **827.07**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-566910

Amount of Each Receipt this Period
140.38

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

Mailing Address 1N165 Partridge Dr

City Wheaton State IL Zip Code 60188

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.94**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A2013-566865

Amount of Each Receipt this Period
69.34

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

Mailing Address 1N165 Partridge Dr

City Wheaton State IL Zip Code 60188

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **413.22**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-567203

Amount of Each Receipt this Period
70.28

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 90
	<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. JONATHAN J WELLS
Full Name (Last, First, Middle Initial)

Mailing Address 5394 W RIVER BEND DRIVE

City LIBERTYVILLE State IL Zip Code 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 ▼ **218.54**

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567155

Amount of Each Receipt this Period
36.97

B. SAMUEL W WHITEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 47 Park View Ln

City Hawthorn Woods State IL Zip Code 60047

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 ▼ **215.34**

Date of Receipt
03 / 22 / 2013
Transaction ID : A2013-567144

Amount of Each Receipt this Period
36.43

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

Mailing Address 1120 JESSICA LANE

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation Risk Mgmt-NCS Product Sr.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.28**

Date of Receipt
03 / 08 / 2013
Transaction ID : A2013-566659

Amount of Each Receipt this Period
42.12

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 90
	<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. JOHN K WILCOX
Full Name (Last, First, Middle Initial)

Mailing Address 1120 JESSICA LANE

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation Risk Mgmt-NCS Product Sr.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567000

Amount of Each Receipt this Period
 42.69

B. JEFFREY W WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 7104 CHARDON COURT

City CLARKSVILLE State MD Zip Code 21029

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566679

Amount of Each Receipt this Period
 44.20

C. JEFFREY W WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 7104 CHARDON COURT

City CLARKSVILLE State MD Zip Code 21029

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567020

Amount of Each Receipt this Period
 44.85

SUBTOTAL of Receipts This Page (optional).....▶	131.74
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: (check only one)	PAGE 75 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. THOMAS J WILSON		Date of Receipt
Mailing Address 2024 N. MOHAWK		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
CHICAGO	IL	60614
FEC ID number of contributing federal political committee.		Transaction ID : A2013-566773
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="253.85"/>
Name of Employer	Occupation	
Allstate Insurance Company	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1269.25"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. THOMAS J WILSON		Date of Receipt
Mailing Address 2024 N. MOHAWK		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
CHICAGO	IL	60614
FEC ID number of contributing federal political committee.		Transaction ID : A2013-567114
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="253.85"/>
Name of Employer	Occupation	
Allstate Insurance Company	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1523.10"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Matthew E Winter		Date of Receipt
Mailing Address 70 Ferncliff Drive		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
West Hartford	CT	06117
FEC ID number of contributing federal political committee.		Transaction ID : A2013-566871
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="170.19"/>
Name of Employer	Occupation	
Allstate Insurance Company	EVP-PC-Pres Auto Home &	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="839.43"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="677.89"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 OF 90
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. Matthew E Winter

Mailing Address 70 Ferncliff Drive

City West Hartford State CT Zip Code 06117

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

Name of Employer Allstate Insurance Company Occupation EVP-PC-Pres Auto Home &

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1012.51**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-567209

Amount of Each Receipt this Period
173.08

Full Name (Last, First, Middle Initial)
B. ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City Ivanhoe State IL Zip Code 60060

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 ▼ **238.48**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-567145

Amount of Each Receipt this Period
40.70

Full Name (Last, First, Middle Initial)
C. DONALD F WYATT JR Jr.

Mailing Address 811 DRESSER DR.

City MT PROSPECT State IL Zip Code 60056

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

Name of Employer Allstate Insurance Company Occupation ATO-Manager-Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.60**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2013

Transaction ID : A2013-567003

Amount of Each Receipt this Period
38.10

SUBTOTAL of Receipts This Page (optional)..... ▶ **251.88**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 90
	<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. FLOYD M YAGER
Full Name (Last, First, Middle Initial)

Mailing Address 1610 BIRCH LANE

City PARK RIDGE	State IL	Zip Code 60068
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-AP-Chief Data Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.21**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566710

Amount of Each Receipt this Period

61.05

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

Mailing Address 1610 BIRCH LANE

City PARK RIDGE	State IL	Zip Code 60068
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-AP-Chief Data Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **362.52**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2013

Transaction ID : A2013-567051

Amount of Each Receipt this Period

62.31

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

Mailing Address 1531 N HIGHLAND AVE

City ARLINGTON HGTS.	State IL	Zip Code 60004
-------------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-PF-Regional Chief Fin
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **298.25**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2013

Transaction ID : A2013-566716

Amount of Each Receipt this Period

60.25

SUBTOTAL of Receipts This Page (optional).....▶	183.61
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 90
	<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. LORI J YELVINGTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1531 N HIGHLAND AVE
 City ARLINGTON HGTS. State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-PF-Regional Chief Fin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.24

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567057
 Amount of Each Receipt this Period 60.99

B. MARY E ZAGORSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 2609 N PINE AVE
 City ARLINGTON HEIGHTS State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation PMO Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.46

Date of Receipt 03 / 08 / 2013
Transaction ID : A2013-566707
 Amount of Each Receipt this Period 42.50

C. MARY E ZAGORSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 2609 N PINE AVE
 City ARLINGTON HEIGHTS State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation PMO Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.23

Date of Receipt 03 / 22 / 2013
Transaction ID : A2013-567048
 Amount of Each Receipt this Period 42.77

SUBTOTAL of Receipts This Page (optional)..... ▶ 146.26
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 79 OF 90
(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. GERALD L ZIMMERMAN JR
 Full Name (Last, First, Middle Initial)
 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 Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 367.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : A2013-566782
 Amount of Each Receipt this Period
 74.01

B. GERALD L ZIMMERMAN JR
 Full Name (Last, First, Middle Initial)
 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 Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 442.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2013
Transaction ID : A2013-567123
 Amount of Each Receipt this Period
 74.56

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

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

SUBTOTAL of Receipts This Page (optional).....▶	148.57
TOTAL This Period (last page this line number only).....▶	13098.21

**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 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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement
March Bank Charge

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Not Applicable

State: IL District:

Date of Disbursement

/ /

Transaction ID : B450921

Amount of Each Disbursement this Period

March Bank Charge

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Ed Royce for Congress

Mailing Address 217 Third Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Ed Royce

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 39

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2013

Transaction ID : B449384

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Perlmutter for Congress

Mailing Address 499 S. Capitol St. SE Ste. 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Ed Perlmutter

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2013

Transaction ID : B449178

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Dennis Ross

Mailing Address 499 S. Capitol St. SE Ste. 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Dennis Ross

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 15

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2013

Transaction ID : B449179

Amount of Each Disbursement this Period

500.00

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

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. The Freedom Fund

Mailing Address 765 10th Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: ID District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2013

Transaction ID : B450384

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Randy Hultgren for Congress

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Contribution

011

Candidate Name

Randy Hultgren

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2013

Transaction ID : B449379

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dan Lipinski for Congress

Mailing Address P.O. Box 520

City Western Springs State IL Zip Code 60558

Purpose of Disbursement
Contribution

011

Candidate Name

Daniel Lipinski

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2013

Transaction ID : B449380

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)..... ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Schock for Congress

Mailing Address 1301 K St. NW Ste. 1050 East

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

011

Candidate Name

Aaron Schock

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2013

Transaction ID : B449385

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Schneider for Congress

Mailing Address 3701 Porter Street NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Contribution

011

Candidate Name

Brad Schneider

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2013

Transaction ID : B450382

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Quigley for Congress

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Mike Quigley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 05

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2013

Transaction ID : B450676

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

Full Name (Last, First, Middle Initial)

A. Friends of Mary Landrieu

Mailing Address 10 G St. NE Suite 570

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

011

Candidate Name

Mary L Landrieu

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: LA District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2013

Transaction ID : B450383

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Hoyer for Congress

Mailing Address 4201 Northview Drive Ste. 307

City Bowie State MD Zip Code 20716

Purpose of Disbursement
Contribution

011

Candidate Name

Steny H Hoyer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2013

Transaction ID : B449177

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Ben Cardin for Senate

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Benjamin Cardin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2013

Transaction ID : B450675

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

Full Name (Last, First, Middle Initial)

A. Gary Peters for Congress

Mailing Address 410 First St. SE Suite 310

City Washington State DC Zip Code 20515

Purpose of Disbursement
Contribution

011

Candidate Name

Gary Peters

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 14

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	3		

Transaction ID : B450381

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Friends of Max Baucus

Mailing Address 122 C Street NW Suite 240

City Washington State DC Zip Code 20001

Purpose of Disbursement
Contribution

011

Candidate Name

Max Baucus

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MT District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	3		

Transaction ID : B449175

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. McHenry for Congress

Mailing Address PO Box 1406

City Hickory State NC Zip Code 28603

Purpose of Disbursement
Contribution

011

Candidate Name

Patrick McHenry

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District: 10

Date of Disbursement

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

Transaction ID : B449381

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

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

3	0	0	.	0	0
---	---	---	---	---	---

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

3	0	0	.	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Lee Terry for Congress

Mailing Address 1707 Prince Street #5

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name
Lee R Terry

Category/
Type

Office Sought: House
 Senate
 President
State: NE District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : B449386

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Tim Bishop for Congress

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement
Contribution

011

Candidate Name
Tim Bishop

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : B449376

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Friends for Gregory Meeks

Mailing Address 499 S. Capitol St. SW Ste. 404

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name
Gregory W Meeks

Category/
Type

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : B449382

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Joyce Beatty for Congress

Mailing Address PO Box 172

City Columbus State OH Zip Code 43216

Purpose of Disbursement
Contribution

011

Candidate Name

Joyce Beatty

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 03

Date of Disbursement

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

Transaction ID : B449375

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Boehner for Speaker

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Joint F/R

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Not Applicable

State: OH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	3

Transaction ID : B450672

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Stivers for Congress

Mailing Address 217 Third Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Steve Stivers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	3

Transaction ID : B450674

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Murphy for Congress

Mailing Address 499 S. Capitol St. SE Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Tim Murphy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 18

Date of Disbursement

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

Transaction ID : B449383

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Friends of Jim Clyburn

Mailing Address 499 S. Capitol St. SW Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

James E Clyburn

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District: 06

Date of Disbursement

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

Transaction ID : B449377

Amount of Each Disbursement this Period

1	5	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Tim Scott for Senate

Mailing Address 499 S. Capitol St. SE Ste. 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Tim Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Special Primary

State: SC District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	9			2	0	1	3	

Transaction ID : B450673

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

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

4	5	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

4	5	0	.	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Jeb Hensarling

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement Contribution

011

Candidate Name

Jeb Hensarling

Category/Type

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2013

Transaction ID : B449176

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. New Democrat Coalition PAC

Mailing Address 700 13th Street NW Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement Contribution

011

Candidate Name

Office Sought: House Senate President
State: DC District:

Disbursement For: 2013
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2013

Transaction ID : B449374

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

Office Sought: House Senate President
State: DC District:

Disbursement For: 2013
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2013

Transaction ID : B449910

Amount of Each Disbursement this Period

10000.00

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

16000.00

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

