



**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="2016"/>		<input type="text" value="54982.64"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="67834.05"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="23137.73"/>	<input type="text" value="70465.59"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="90971.78"/>	<input type="text" value="125448.23"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20007.93"/>	<input type="text" value="54484.38"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="70963.85"/>	<input type="text" value="70963.85"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: 03 / 01 / 2016 To: 03 / 31 / 2016

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).....	13724.40	25868.96
(ii) Unitemized .....	9413.33	44596.63
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	23137.73	70465.59
(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) .....	23137.73	70465.59
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))..... ▶	23137.73	70465.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	23137.73	70465.59

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	107.93	384.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	107.93	384.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	49000.00
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 .....	2900.00	5100.00
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)) ..	20007.93	54484.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20007.93	54484.38

**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) .....	23137.73	70465.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	23137.73	70465.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	107.93	384.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	107.93	384.38

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. ALEXANDRA BALATSOUKAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1225 W. Morse Unit 508  
 City Chicago State IL Zip Code 60626  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation Claims-Field Leadership C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.16

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447662**  
 Amount of Each Receipt this Period 34.36  
 Memo Item

**B. WILLIAM P BALLINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 61 Tournament Dr N  
 City Hawthorn Woods State IL Zip Code 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-PO-Chief Underwriter  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301252**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**C. WILLIAM P BALLINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 61 Tournament Dr N  
 City Hawthorn Woods State IL Zip Code 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-PO-Chief Underwriter  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447531**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.36
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Form/Schedule: SA11AI  
Transaction ID :

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

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. PHILLIP W BANET**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1975 Merlot Ct  
 City Wheeling State IL Zip Code 60090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation PIM-Actuary-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 219.50

Date of Receipt  
 03 / 04 / 2016  
**Transaction ID : A2016-301280**  
 Amount of Each Receipt this Period 43.90  
 Memo Item

**B. PHILLIP W BANET**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1975 Merlot Ct  
 City Wheeling State IL Zip Code 60090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation PIM-Actuary-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 263.40

Date of Receipt  
 03 / 18 / 2016  
**Transaction ID : A2016-447559**  
 Amount of Each Receipt this Period 43.90  
 Memo Item

**C. WALTER A BERKOWICZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 405 GATESHEAD DRIVE  
 City NAPERVILLE State IL Zip Code 60565  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation ATSV-Architect-Sr Exp  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 227.28

Date of Receipt  
 03 / 18 / 2016  
**Transaction ID : A2016-447631**  
 Amount of Each Receipt this Period 37.88  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. LONDON B BRADLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4561 Dodds Mills Drive  
 City haymarket State VA Zip Code 20169  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-ABD-Field Vice Preside  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301425**  
 Amount of Each Receipt this Period  
 43.29  
 Memo Item

**B. LONDON B BRADLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4561 Dodds Mills Drive  
 City haymarket State VA Zip Code 20169  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-ABD-Field Vice Preside  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 259.74

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447703**  
 Amount of Each Receipt this Period  
 43.29  
 Memo Item

**C. SHAWN L BROADFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1044 APPLE BLOSSOM COURT  
 City LAKE ZURICH State IL Zip Code 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-CLAIMS-Technical Execu  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 277.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301317**  
 Amount of Each Receipt this Period  
 55.57  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	142.15
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<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. SHAWN L BROADFIELD**  
Full Name (Last, First, Middle Initial)

Mailing Address 1044 APPLE BLOSSOM COURT

City LAKE ZURICH State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation VP-CLAIMS-Technical Execu

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.42**

Date of Receipt **03 / 18 / 2016**  
Transaction ID : **A2016-447596**

Amount of Each Receipt this Period **55.57**

Memo Item

**B. GREGORY C BURNS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 N. BROADMOOR LANE

City VERNON HILLS State IL Zip Code 60061

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

Name of Employer Allstate Insurance Company Occupation SVP-HR-Client Partnership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.75**

Date of Receipt **03 / 04 / 2016**  
Transaction ID : **A2016-301237**

Amount of Each Receipt this Period **60.35**

Memo Item

**C. GREGORY C BURNS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 N. BROADMOOR LANE

City VERNON HILLS State IL Zip Code 60061

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

Name of Employer Allstate Insurance Company Occupation SVP-HR-Client Partnership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **362.10**

Date of Receipt **03 / 18 / 2016**  
Transaction ID : **A2016-447517**

Amount of Each Receipt this Period **60.35**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **176.27**

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

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

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

FOR LINE NUMBER: PAGE 11 OF 84  
(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. 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-ABD-Field Senior Vice

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
474.05

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2016  
**Transaction ID : A2016-301395**

Amount of Each Receipt this Period  
94.81

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Michael Capuzzi**

Mailing Address 2630 W. Winona Street

City State Zip Code  
Chicago IL 60625

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

Name of Employer Occupation  
Allstate Insurance Company SVP-CLAIMS-Regional Claim

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
207.70

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2016  
**Transaction ID : A2016-301495**

Amount of Each Receipt this Period  
41.54

Memo Item

Full Name (Last, First, Middle Initial)  
**c. Michael Capuzzi**

Mailing Address 2630 W. Winona Street

City State Zip Code  
Chicago IL 60625

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

Name of Employer Occupation  
Allstate Insurance Company SVP-CLAIMS-Regional Claim

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.24

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2016  
**Transaction ID : A2016-447773**

Amount of Each Receipt this Period  
41.54

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 177.89

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

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

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

FOR LINE NUMBER: PAGE 12 OF 84  
(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. CHRISTOPHER W CLAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9832 Toscano Drive  
 City ELK GROVE State CA Zip Code 95757  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation L&R-Gov & Ind Rel Attorne  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.30

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447734**  
 Amount of Each Receipt this Period 37.55  
 Memo Item

**B. DEBORAH L CLOUSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4667 TAMWORTH DR  
 City PALM HARBOR State FL Zip Code 34685  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation Mktg-Regional Field-Sr Mg  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.50

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447639**  
 Amount of Each Receipt this Period 34.75  
 Memo Item

**C. KRISTA A Conte**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5157 Piazza Place  
 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 VP-ABD-Field Vice Preside  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447498**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 130.30  
**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 13 OF 84
	<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-ATSV-Group CIO Person
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
353.75

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301200**

Amount of Each Receipt this Period  
70.75

Memo Item

**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-ATSV-Group CIO Person
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
424.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447480**

Amount of Each Receipt this Period  
70.75

Memo Item

**C. Teresa J Dalenta**  
Full Name (Last, First, Middle Initial)

Mailing Address 528 Cumnor Court

City Deerfield	State IL	Zip Code 60015
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-PO-Product Line Manag
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.90

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301487**

Amount of Each Receipt this Period  
40.38

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	181.88
<b>TOTAL</b> This Period (last page this line 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 14 OF 84
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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**

Full Name (Last, First, Middle Initial)  
**A. Teresa J Dalenta**

Mailing Address 528 Cumnor Court

City State Zip Code  
Deerfield IL 60015

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

Name of Employer Occupation  
Allstate Insurance Company SVP-PO-Product Line Manag

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 / 18 / 2016  
**Transaction ID : A2016-447765**

Amount of Each Receipt this Period  
40.38

Memo Item

Full Name (Last, First, Middle Initial)  
**B. RANDALL 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-ABO-Agency Service

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
239.65

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301310**

Amount of Each Receipt this Period  
47.93

Memo Item

Full Name (Last, First, Middle Initial)  
**C. RANDALL 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-ABO-Agency Service

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
287.58

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447589**

Amount of Each Receipt this Period  
47.93

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	136.24
<b>TOTAL</b> This Period (last page this line 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 84
	<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-PO-Product Vice Presid

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
294.55

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2016  
**Transaction ID : A2016-301370**

Amount of Each Receipt this Period  
58.91

Memo Item

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-PO-Product Vice Presid

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
353.46

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2016  
**Transaction ID : A2016-447650**

Amount of Each Receipt this Period  
58.91

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Victoria A Dinges**

Mailing Address 421 Chapel Hill Lane

City State Zip Code  
Northfield IL 60093

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

Name of Employer Occupation  
Allstate Insurance Company SVP-CR-Ent. Social Resp.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.70

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2016  
**Transaction ID : A2016-301462**

Amount of Each Receipt this Period  
68.14

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 185.96

**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: PAGE 16 OF 84  
(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. Victoria A Dinges**

Mailing Address 421 Chapel Hill Lane

City State Zip Code  
 Northfield IL 60093

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

Name of Employer Occupation  
 Allstate Insurance Company SVP-CR-Ent. Social Resp.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 408.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447740**

Amount of Each Receipt this Period  
 68.14

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Pranava Doctor**

Mailing Address 2189 Avalon Dr

City State Zip Code  
 Buffalo Grove IL 60089

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

Name of Employer Occupation  
 Allstate Insurance Company VP-ATSV-Sales & Service T

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 232.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301491**

Amount of Each Receipt this Period  
 58.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Pranava Doctor**

Mailing Address 2189 Avalon Dr

City State Zip Code  
 Buffalo Grove IL 60089

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

Name of Employer Occupation  
 Allstate Insurance Company VP-ATSV-Sales & Service T

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447769**

Amount of Each Receipt this Period  
 58.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 184.14

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 84
	(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"/> 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. PATRICIA B DREXLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 472 W. SYCAMORE ST.  
 City State Zip Code  
 VERNON HILLS IL 60061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company CCC-Contact Center Strate  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 227.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447573**  
 Amount of Each Receipt this Period  
 37.99  
 Memo Item

**B. Stacy Drumtra**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 114 E. Euclid Ave  
 City State Zip Code  
 Arlington Heights IL 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company CR-Corporate Comm-Dir  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 222.48

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447741**  
 Amount of Each Receipt this Period  
 37.08  
 Memo Item

**C. DONALD L DUFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Washington Ct..  
 City State Zip Code  
 STREAMWOOD IL 60107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company ABI-Product Line-Dir  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 234.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447572**  
 Amount of Each Receipt this Period  
 39.13  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	114.20
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

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

FOR LINE NUMBER: PAGE 18 OF 84  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)  
**A. Miguel Edwards**

Mailing Address 21 Seneca Ave West

City Hathorn Woods	State IL	Zip Code 60047
-----------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-AIA-Operations
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.65

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016

**Transaction ID : A2016-301492**

Amount of Each Receipt this Period  
46.13

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Miguel Edwards**

Mailing Address 21 Seneca Ave West

City Hathorn Woods	State IL	Zip Code 60047
-----------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-AIA-Operations
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016

**Transaction ID : A2016-447770**

Amount of Each Receipt this Period  
46.13

Memo Item

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

Mailing Address 10323 TRUMBULL AVE

City CHICAGO	State IL	Zip Code 60655
-----------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-FSS-Accounting
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016

**Transaction ID : A2016-301364**

Amount of Each Receipt this Period  
53.85

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	146.11
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. KATHLEEN N ENRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10323 TRUMBULL AVE  
 City CHICAGO State IL Zip Code 60655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-FSS-Accounting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 323.10

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447644**  
 Amount of Each Receipt this Period  
 53.85  
 Memo Item

**B. MICHAEL L ESCOBAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 660 BALMORAL LANE  
 City INVERNESS State IL Zip Code 60067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-HR-Diversity & Org. Ef  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.85

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301205**  
 Amount of Each Receipt this Period  
 59.77  
 Memo Item

**C. MICHAEL L ESCOBAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 660 BALMORAL LANE  
 City INVERNESS State IL Zip Code 60067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-HR-Diversity & Org. Ef  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.62

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447485**  
 Amount of Each Receipt this Period  
 59.77  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	173.39
<b>TOTAL</b> This Period (last page this line 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 20 OF 84
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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 J Flynn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5 Sunset Terrace

City West Hartford	State CT	Zip Code 06107
-----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
311.55

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301506**

Amount of Each Receipt this Period  
62.31

Memo Item

**B. James J Flynn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5 Sunset Terrace

City West Hartford	State CT	Zip Code 06107
-----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373.86

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447784**

Amount of Each Receipt this Period  
62.31

Memo Item

**C. 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-L&R-Allstate Financial
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301418**

Amount of Each Receipt this Period  
58.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	182.62
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<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. 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-L&R-Allstate Financial  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **348.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-447696**  
 Amount of Each Receipt this Period **58.00**  
 Memo Item

**B. Mary Jane B Fortin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4510 Shetland Lane  
 City Houston State TX Zip Code 77027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation EVP-APL-President Allstat  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **965.00**

Date of Receipt **03 / 04 / 2016**  
**Transaction ID : A2016-301509**  
 Amount of Each Receipt this Period **193.00**  
 Memo Item

**c. Mary Jane B Fortin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4510 Shetland Lane  
 City Houston State TX Zip Code 77027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation EVP-APL-President Allstat  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1158.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-447787**  
 Amount of Each Receipt this Period **193.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>444.00</b>
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<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. Oyauma M Garrison**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1040 Heritage St  
 City Blacklick State OH Zip Code 43004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-ABD-Field Vice Preside  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301505**  
 Amount of Each Receipt this Period  
 58.00  
 Memo Item

**B. Oyauma M Garrison**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1040 Heritage St  
 City Blacklick State OH Zip Code 43004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-ABD-Field Vice Preside  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447783**  
 Amount of Each Receipt this Period  
 58.00  
 Memo Item

**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 ALR-Fin Analysis-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301334**  
 Amount of Each Receipt this Period  
 42.05  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ► 158.05  
**TOTAL** This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Allstate Insurance Company PAC**

**A. NICK GEORGAKOPOULOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1129 N Mitchell Ave  
 City State Zip Code  
 Arlington Heights IL 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company ALR-Fin Analysis-Dir  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 252.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447613**  
 Amount of Each Receipt this Period  
 42.05  
 Memo Item

**B. BONNIE S GILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1570 EDGEFIELD LANE  
 City State Zip Code  
 HOFFMAN ESTATES IL 60169  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-PO-Product Vice Presid  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 209.28

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447698**  
 Amount of Each Receipt this Period  
 34.88  
 Memo Item

**C. JOAN M GILMORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 656 S BUCKINGHAM CT  
 City State Zip Code  
 LAKE FOREST IL 60045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company L&R-Lit Svcs Attorney HO-  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301206**  
 Amount of Each Receipt this Period  
 47.01  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	123.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 24 OF 84  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**Allstate Insurance Company PAC**

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

Mailing Address **656 S BUCKINGHAM CT**

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

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

Name of Employer Occupation  
**Allstate Insurance Company L&R-Lit Svcs Attorney HO-**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **282.06**

Date of Receipt  
**03 / 18 / 2016**

**Transaction ID : A2016-447486**

Amount of Each Receipt this Period  
**47.01**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. JAMES D GLENN**

Mailing Address **1038 N. Glenview Court**

City State Zip Code  
**Palatine IL 60067**

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

Name of Employer Occupation  
**Allstate Insurance Company Claims-Field Leadership-D**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.00**

Date of Receipt  
**03 / 18 / 2016**

**Transaction ID : A2016-447528**

Amount of Each Receipt this Period  
**39.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. RICHARD M GOLICK**

Mailing Address **2372 SIMPSON FARM WAY**

City State Zip Code  
**SMYRNA GA 30080**

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

Name of Employer Occupation  
**Allstate Insurance Company L&R-Gov & Ind Rel Attorne**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **218.45**

Date of Receipt  
**03 / 04 / 2016**

**Transaction ID : A2016-301444**

Amount of Each Receipt this Period  
**43.69**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **129.70**

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

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

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

FOR LINE NUMBER: PAGE 25 OF 84  
(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. RICHARD M GOLICK**  
 Mailing Address 2372 SIMPSON FARM WAY  
 City State Zip Code  
 SMYRNA GA 30080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company L&R-Gov & Ind Rel Attorne  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 262.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447722**  
 Amount of Each Receipt this Period  
 43.69  
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. Daniel Gordon**  
 Mailing Address 25225 North Iroquois Court  
 City State Zip Code  
 Lake Barrington IL 60010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-L&R-Securities & Corpo  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 234.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447779**  
 Amount of Each Receipt this Period  
 39.00  
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. ANN A GOULD**  
 Mailing Address 4071 NEWPORT LANE  
 City State Zip Code  
 ARLINGTON HTS IL 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company L&R-Corp/Claim Lit Attorn  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 223.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447719**  
 Amount of Each Receipt this Period  
 37.30  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 119.99  
**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 26 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Allstate Insurance Company PAC**

**A. GEORGE F GRAWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 801 N. Vail Avenue  
 City State Zip Code  
 Arlington Heights IL 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company SVP-L&R-Staff & Retained  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 282.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301269**  
 Amount of Each Receipt this Period  
 56.50  
 Memo Item

**B. GEORGE F GRAWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 801 N. Vail Avenue  
 City State Zip Code  
 Arlington Heights IL 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company SVP-L&R-Staff & Retained  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 339.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447548**  
 Amount of Each Receipt this Period  
 56.50  
 Memo Item

**C. Mark A Green**  
 Full Name (Last, First, Middle Initial)  
 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-AB2B-President Encomp  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 341.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301472**  
 Amount of Each Receipt this Period  
 68.35  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.35
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Allstate Insurance Company PAC**

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

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-AB2B-President Encomp

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.10

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2016  
**Transaction ID : A2016-447750**

Amount of Each Receipt this Period  
68.35

Memo Item

**B. JUDITH P GREFFIN**  
Full Name (Last, First, Middle Initial)

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 ▼  
403.85

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2016  
**Transaction ID : A2016-301278**

Amount of Each Receipt this Period  
80.77

Memo Item

**C. JUDITH P GREFFIN**  
Full Name (Last, First, Middle Initial)

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 ▼  
484.62

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2016  
**Transaction ID : A2016-447557**

Amount of Each Receipt this Period  
80.77

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	229.89
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 28 OF 84  
(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. M'BA G GREGOIRE**

Mailing Address 35 Linden Road

City State Zip Code  
 Lake Zurich IL 60047

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

Name of Employer Occupation  
 Allstate Insurance Company L&R-Lit Svcs Attorney HO-

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ **225.30**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2016**

**Transaction ID : A2016-301445**

Amount of Each Receipt this Period  
**45.06**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. M'BA G GREGOIRE**

Mailing Address 35 Linden Road

City State Zip Code  
 Lake Zurich IL 60047

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

Name of Employer Occupation  
 Allstate Insurance Company L&R-Lit Svcs Attorney HO-

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ **270.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-447723**

Amount of Each Receipt this Period  
**45.06**

Memo Item

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

Mailing Address 6130 St. Andrews Ct.

City State Zip Code  
 Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
 Allstate Insurance Company SVP-AB2B-President Allsta

Receipt For: Aggregate Year-to-Date ▼  
 Primary     General  
 Other (specify) ▼ **210.24**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-447664**

Amount of Each Receipt this Period  
**35.04**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **125.16**

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

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

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

FOR LINE NUMBER: PAGE 29 OF 84  
(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. Sanjay Gupta**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1971 Farnsworth Ln  
City Northbrook State IL Zip Code 60062  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation EVP-Mktg Innovation & Co  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 331.75

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301493**  
Amount of Each Receipt this Period 66.35  
 Memo Item

**B. Sanjay Gupta**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1971 Farnsworth Ln  
City Northbrook State IL Zip Code 60062  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation EVP-Mktg Innovation & Co  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 398.10

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447771**  
Amount of Each Receipt this Period 66.35  
 Memo Item

**c. David S Harper**  
Full Name (Last, First, Middle Initial)  
Mailing Address 41 Lancaster Lane  
City Lincolnshire State IL Zip Code 60069  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation SVP-FSS-Tax  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 346.10

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301476**  
Amount of Each Receipt this Period 69.22  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 201.92  
**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 30 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. David S Harper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 Lancaster Lane  
 City Lincolnshire State IL Zip Code 60069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-FSS-Tax  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.32

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447754**  
 Amount of Each Receipt this Period 69.22  
 Memo Item

**B. Cheryl A Harris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4136 Three Lakes 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 SVP-ABO-Sourcing & Procur  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.60

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301486**  
 Amount of Each Receipt this Period 66.12  
 Memo Item

**C. Cheryl A Harris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4136 Three Lakes 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 SVP-ABO-Sourcing & Procur  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 396.72

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447764**  
 Amount of Each Receipt this Period 66.12  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.46
<b>TOTAL</b> This Period (last page this line 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 31 OF 84
	<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. KEITH A HAUSCHILDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 Players Club Villas Rd  
 City State Zip Code  
 Ponte Vedra FL 32082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-AB2B-Allstate Benefits  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301276**  
 Amount of Each Receipt this Period  
 40.21  
 Memo Item

**B. KEITH A HAUSCHILDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 Players Club Villas Rd  
 City State Zip Code  
 Ponte Vedra FL 32082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-AB2B-Allstate Benefits  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 241.26

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447555**  
 Amount of Each Receipt this Period  
 40.21  
 Memo Item

**C. Jon E Hedegard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1314 Rose St. NE  
 City State Zip Code  
 Olympia WA 98506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company L&R-Gov & Ind Rel Attorne  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.38

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447775**  
 Amount of Each Receipt this Period  
 34.23  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	114.65
<b>TOTAL</b> This Period (last page this line 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 84
	<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. 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-PO-Regional Product M  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 719.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301258**  
 Amount of Each Receipt this Period  
 143.89  
 Memo Item

**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-PO-Regional Product M  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 863.34

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447537**  
 Amount of Each Receipt this Period  
 143.89  
 Memo Item

**C. PAMELA B HOLLANDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2830 Lexington Lane  
 City Highland Park State IL Zip Code 60035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-MKTG-AB2B Sponsorships  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301201**  
 Amount of Each Receipt this Period  
 58.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	345.78
<b>TOTAL</b> This Period (last page this line 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 84
	<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**

**A. PAMELA B HOLLANDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2830 Lexington Lane  
 City Highland Park State IL Zip Code 60035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-MKTG-AB2B Sponsorships  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447481**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**B. 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-L&R-Corporate Law  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.56

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301335**  
 Amount of Each Receipt this Period 60.39  
 Memo Item

**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-L&R-Corporate Law  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.95

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447614**  
 Amount of Each Receipt this Period 60.39  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	178.78
<b>TOTAL</b> This Period (last page this line 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 84
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. MARIANO A IMBARRATO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10825 CHAUCER DRIVE  
 City State Zip Code  
 WILLOW SPRINGS IL 60480  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-AF-Capital Planning &  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 261.45

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301323**  
 Amount of Each Receipt this Period  
 52.29  
 Memo Item

**B. MARIANO A IMBARRATO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10825 CHAUCER DRIVE  
 City State Zip Code  
 WILLOW SPRINGS IL 60480  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-AF-Capital Planning &  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 313.74

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447602**  
 Amount of Each Receipt this Period  
 52.29  
 Memo Item

**C. JAMES C JAMIESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 935 Lancaster Rd..  
 City State Zip Code  
 Lake Zurich IL 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company ARE-Real Estate & Constru  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 214.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301297**  
 Amount of Each Receipt this Period  
 42.99  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	147.57
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

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

FOR LINE NUMBER: PAGE 35 OF 84  
(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. JAMES C JAMIESON**

Mailing Address 935 Lancaster Rd..

City Lake Zurich	State IL	Zip Code 60047
---------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation ARE-Real Estate & Constr
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
257.94

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447576**

Amount of Each Receipt this Period  
42.99

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Wilford J Kavanaugh**

Mailing Address 7 Open Parkway North

City Hawthorn Woods	State IL	Zip Code 60047
------------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-APL-Life Ins. & Broke
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
293.30

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301481**

Amount of Each Receipt this Period  
58.66

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Wilford J Kavanaugh**

Mailing Address 7 Open Parkway North

City Hawthorn Woods	State IL	Zip Code 60047
------------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-APL-Life Ins. & Broke
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.96

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447759**

Amount of Each Receipt this Period  
58.66

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.31
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. 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-ABO-Portfolio Mgmt &  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.40

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301193**  
 Amount of Each Receipt this Period 59.08  
 Memo Item

**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-ABO-Portfolio Mgmt &  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 354.48

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447473**  
 Amount of Each Receipt this Period 59.08  
 Memo Item

**C. JEFFREY D KNIPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2050 GLENDALE AVE  
 City NORTHBROOK State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation LifeUWCL-Leader-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.70

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301423**  
 Amount of Each Receipt this Period 40.14  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	158.30
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<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. JEFFREY D KNIPP**

Mailing Address 2050 GLENDALE AVE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation LifeUWCL-Leader-Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.84**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-447701**

Amount of Each Receipt this Period  
**40.14**

Memo Item

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

Mailing Address 1950 Merritt Lane

City Lake Forest State IL Zip Code 60045

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

Name of Employer Allstate Insurance Company Occupation EVP-L&R-Gen'l Counsel & C

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **576.90**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2016**

**Transaction ID : A2016-301191**

Amount of Each Receipt this Period  
**115.38**

Memo Item

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

Mailing Address 1950 Merritt Lane

City Lake Forest State IL Zip Code 60045

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

Name of Employer Allstate Insurance Company Occupation EVP-L&R-Gen'l Counsel & C

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **692.28**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-447471**

Amount of Each Receipt this Period  
**115.38**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>270.90</b>
<b>TOTAL</b> This Period (last page this line 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 38 OF 84
	<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 G Logothesis**  
Full Name (Last, First, Middle Initial)

Mailing Address 2326 Indian Ridge Drive

City State Zip Code  
Glenview IL 60026

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

Name of Employer Occupation  
Allstate Insurance Company SVP-ATSV Group CIO/CTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **318.35**

Date of Receipt  
MM / DD / YYYY  
**03 / 04 / 2016**

**Transaction ID : A2016-301482**

Amount of Each Receipt this Period  
**63.67**

Memo Item

**B. Peter G Logothesis**  
Full Name (Last, First, Middle Initial)

Mailing Address 2326 Indian Ridge Drive

City State Zip Code  
Glenview IL 60026

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

Name of Employer Occupation  
Allstate Insurance Company SVP-ATSV Group CIO/CTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **382.02**

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2016**

**Transaction ID : A2016-447760**

Amount of Each Receipt this Period  
**63.67**

Memo Item

**C. GREGORY J LUCETT**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 9242

City State Zip Code  
GLENDALE CA 91226

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

Name of Employer Occupation  
Allstate Insurance Company L&R-Lit Svcs Attorney-Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **234.30**

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2016**

**Transaction ID : A2016-447721**

Amount of Each Receipt this Period  
**39.05**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>166.39</b>
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. 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 L&R-Ins Ops Attorney-Sr E  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 217.38

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447637**  
 Amount of Each Receipt this Period 36.23  
 Memo Item

**B. Katherine A Mabe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2750 Commons Drive  
 City Glenview State IL Zip Code 60026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation EVP-APL-Allstate Brand Di  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 588.45

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301480**  
 Amount of Each Receipt this Period 117.69  
 Memo Item

**C. Katherine A Mabe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2750 Commons Drive  
 City Glenview State IL Zip Code 60026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation EVP-APL-Allstate Brand Di  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 706.14

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447758**  
 Amount of Each Receipt this Period 117.69  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	271.61
<b>TOTAL</b> This Period (last page this line 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 40 OF 84
	<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. Rhonda J Masser**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4807 Wildwood Dr  
 City McHenry State IL Zip Code 60051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation HR-Client Partnership-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 259.26

Date of Receipt  
 03 / 04 / 2016  
**Transaction ID : A2016-301286**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**B. Rhonda J Masser**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4807 Wildwood Dr  
 City McHenry State IL Zip Code 60051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation HR-Client Partnership-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 317.26

Date of Receipt  
 03 / 18 / 2016  
**Transaction ID : A2016-447565**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**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 L&R-Ins Ops Attorney-Top  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 214.70

Date of Receipt  
 03 / 04 / 2016  
**Transaction ID : A2016-301321**  
 Amount of Each Receipt this Period 42.94  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	158.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 41 OF 84  
(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 A MC LAUGHLIN**  
 Mailing Address 25748 N. Stoney Kirk Ct.  
 City State Zip Code  
 Hawthorn Woods IL 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company L&R-Ins Ops Attorney-Top  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 257.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447600**  
 Amount of Each Receipt this Period  
 42.94  
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. THOMAS R MCDONNELL**  
 Mailing Address 1519 Lincoln Street  
 City State Zip Code  
 EVANSTON IL 60201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-PF-Property & Casualty  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 287.55

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301399**  
 Amount of Each Receipt this Period  
 57.51  
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. THOMAS R MCDONNELL**  
 Mailing Address 1519 Lincoln Street  
 City State Zip Code  
 EVANSTON IL 60201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-PF-Property & Casualty  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 345.06

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447678**  
 Amount of Each Receipt this Period  
 57.51  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 157.96  
**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 42 OF 84
	<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 A MCELVAIN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 587 RIFORD ROAD

City GLEN ELLYN	State IL	Zip Code 60137
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation L&R-Investment Attorney-T
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301333**

Amount of Each Receipt this Period  
45.50

Memo Item

**B. PETER A MCELVAIN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 587 RIFORD ROAD

City GLEN ELLYN	State IL	Zip Code 60137
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation L&R-Investment Attorney-T
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447612**

Amount of Each Receipt this Period  
45.50

Memo Item

**C. MARK A MCGILLIVRAY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1028 PORTSMOUTH CIRCLE

City GURNEE	State IL	Zip Code 60031
----------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-CLAIMS-Centralized Se
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.88

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447709**

Amount of Each Receipt this Period  
33.48

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	124.48
<b>TOTAL</b> This Period (last page this line 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 43 OF 84
	<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. EVA M MCINTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4109 W Bath Road  
 City Akron State OH Zip Code 44333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation Claims-Field Leadership-D  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **234.05**

Date of Receipt **03 / 04 / 2016**  
**Transaction ID : A2016-301429**  
 Amount of Each Receipt this Period **46.81**  
 Memo Item

**B. EVA M MCINTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4109 W Bath Road  
 City Akron State OH Zip Code 44333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation Claims-Field Leadership-D  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **280.86**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-447707**  
 Amount of Each Receipt this Period **46.81**  
 Memo Item

**C. Jesse E Merten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 76 Logan Loop  
 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-FSS-Treasurer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **360.00**

Date of Receipt **03 / 04 / 2016**  
**Transaction ID : A2016-301483**  
 Amount of Each Receipt this Period **72.00**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **165.62**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Allstate Insurance Company PAC**

**A. Jesse E Merten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 76 Logan Loop  
 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-FSS-Treasurer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **432.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-447761**  
 Amount of Each Receipt this Period **72.00**  
 Memo Item

**B. Myra R Michail**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 914 Hinman Ave. Unit 2-W  
 City Evanston State IL Zip Code 60202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation L&R-Gov & Ind Rel-Sr Exp  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 10 / 2016**  
**Transaction ID : A2016-349922**  
 Amount of Each Receipt this Period **300.00**  
 Memo Item

**C. FREDERICK J MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16343 Smith Mountain Lake Parkway  
 City Huddleston State VA Zip Code 24104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation ABD-Territory Sales Leade  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **212.76**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-447560**  
 Amount of Each Receipt this Period **35.46**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>407.46</b>
<b>TOTAL</b> This Period (last page this line 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 84
	<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. 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 L&R-State Filings-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.35

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301254**  
 Amount of Each Receipt this Period 42.47  
 Memo Item

**B. 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 L&R-State Filings-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 254.82

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447533**  
 Amount of Each Receipt this Period 42.47  
 Memo Item

**C. 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 L&R-Corp/Claim Lit Attorn  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.85

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301302**  
 Amount of Each Receipt this Period 45.77  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 130.71  
**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 84  
(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. 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 L&R-Corp/Claim Lit Attorn  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 274.62

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447581**  
Amount of Each Receipt this Period 45.77  
 Memo Item

**B. JAMES E MURRAY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 23665 N. HILLFARM RD  
City LAKE BARRINGTON State IL Zip Code 60010  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation VP-CLAIMS-Claims Executiv  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.35

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301190**  
Amount of Each Receipt this Period 56.07  
 Memo Item

**C. JAMES E MURRAY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 23665 N. HILLFARM RD  
City LAKE BARRINGTON State IL Zip Code 60010  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation VP-CLAIMS-Claims Executiv  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 336.42

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447470**  
Amount of Each Receipt this Period 56.07  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 157.91  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 47 OF 84  
(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. DAVID G NADIG**  
 Mailing Address 2950 LAKE PLACID  
 City NORTHBROOK State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-L&R-Protection Law  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **345.30**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2016**  
**Transaction ID : A2016-301372**  
 Amount of Each Receipt this Period  
**69.06**  
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. DAVID G NADIG**  
 Mailing Address 2950 LAKE PLACID  
 City NORTHBROOK State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-L&R-Protection Law  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **414.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**  
**Transaction ID : A2016-447652**  
 Amount of Each Receipt this Period  
**69.06**  
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. DANIEL C NECASTRO**  
 Mailing Address 22622 N. LINDEN DR  
 City LAKE BARRINGTON State IL Zip Code 60010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-ATSV-Bus Prtn-Busines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **374.75**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2016**  
**Transaction ID : A2016-301292**  
 Amount of Each Receipt this Period  
**74.95**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **213.07**  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 84
	<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. DANIEL C NECASTRO**  
Full Name (Last, First, Middle Initial)

Mailing Address 22622 N. LINDEN DR

City LAKE BARRINGTON State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation SVP-ATSV-Bus Prtn-Busines

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **449.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-447571**

Amount of Each Receipt this Period  
**74.95**

Memo Item

**B. PATRICK K NOLL**  
Full Name (Last, First, Middle Initial)

Mailing Address 22451 THORNBURY CT

City DEER PARK State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation SVP-L&R-Enterprise Busine

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2016**

**Transaction ID : A2016-301417**

Amount of Each Receipt this Period  
**75.00**

Memo Item

**C. PATRICK K NOLL**  
Full Name (Last, First, Middle Initial)

Mailing Address 22451 THORNBURY CT

City DEER PARK State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation SVP-L&R-Enterprise Busine

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-447695**

Amount of Each Receipt this Period  
**75.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>224.95</b>
<b>TOTAL</b> This Period (last page this line 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 84
	<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. KENNETH I OMURA**

Mailing Address 361 KELBURN RD. #315

City DEERFIELD	State IL	Zip Code 60015
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation L&R-Ins Ops Attorney-Top
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.15

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301277**

Amount of Each Receipt this Period  
42.23

Memo Item

Full Name (Last, First, Middle Initial)  
**B. KENNETH I OMURA**

Mailing Address 361 KELBURN RD. #315

City DEERFIELD	State IL	Zip Code 60015
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation L&R-Ins Ops Attorney-Top
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
253.38

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447556**

Amount of Each Receipt this Period  
42.23

Memo Item

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

Mailing Address 1677 Lee Road

City Clearwater	State FL	Zip Code 33765
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Claims-Field Leadership F
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
263.30

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301273**

Amount of Each Receipt this Period  
52.66

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	137.12
<b>TOTAL</b> This Period (last page this line 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 84
	<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. PAMELA J OVERTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1677 Lee Road

City Clearwater	State FL	Zip Code 33765
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims-Field Leadership F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.96	

Date of Receipt  
03 / 18 / 2016  
**Transaction ID : A2016-447552**

Amount of Each Receipt this Period  
52.66

Memo Item

**B. Opal G Perry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2775 N. Sanders Rd.

City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-ATSV-Bus Prtn-Claims	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.05	

Date of Receipt  
03 / 04 / 2016  
**Transaction ID : A2016-301490**

Amount of Each Receipt this Period  
48.61

Memo Item

**c. Opal G Perry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2775 N. Sanders Rd.

City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-ATSV-Bus Prtn-Claims	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.66	

Date of Receipt  
03 / 18 / 2016  
**Transaction ID : A2016-447768**

Amount of Each Receipt this Period  
48.61

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	149.88
<b>TOTAL</b> This Period (last page this line number 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 84  
(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. 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 ATSV-Manager-Sr Mgr
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
218.10

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447732**

Amount of Each Receipt this Period  
36.35

Memo Item

**B. STEVEN A PETTI**  
Full Name (Last, First, Middle Initial)  
Mailing Address 580 SALCEDA DR

City MUNDELEIN	State IL	Zip Code 60060
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-PF-Property & Casualty
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
287.45

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301217**

Amount of Each Receipt this Period  
57.49

Memo Item

**C. STEVEN A PETTI**  
Full Name (Last, First, Middle Initial)  
Mailing Address 580 SALCEDA DR

City MUNDELEIN	State IL	Zip Code 60060
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-PF-Property & Casualty
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
344.94

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447497**

Amount of Each Receipt this Period  
57.49

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	151.33
<b>TOTAL</b> This Period (last page this line 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 84
	<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. NANCY W PHILLIPS**  
Full Name (Last, First, Middle Initial)

Mailing Address 102 RIVER OAKS RD

City BRENWOOD State TN Zip Code 37027

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

Name of Employer Allstate Insurance Company Occupation L&R-Lit Svcs Attorney-Sr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.56

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447551**

Amount of Each Receipt this Period 34.76

Memo Item

**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 ▼ 209.20

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301291**

Amount of Each Receipt this Period 41.84

Memo Item

**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 ▼ 251.04

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447570**

Amount of Each Receipt this Period 41.84

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 118.44

**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 53 OF 84
	<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. 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 EVP-ABD-Pres. Eastern Ter  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.70

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301212**  
 Amount of Each Receipt this Period 84.74  
 Memo Item

**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 EVP-ABD-Pres. Eastern Ter  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 508.44

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447492**  
 Amount of Each Receipt this Period 84.74  
 Memo Item

**C. MARY JO 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 VP-L&R-Investment Law  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 248.20

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301392**  
 Amount of Each Receipt this Period 49.64  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	219.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 54 OF 84  
(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. MARY JO J QUINN**  
 Mailing Address 837 S. CHESTNUT AVENUE  
 City State Zip Code  
 ARLINGTON HEIGH IL 60005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-L&R-Investment Law  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 297.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447672**  
 Amount of Each Receipt this Period  
 49.64  
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. MARIO RIZZO**  
 Mailing Address 5926 W. 90TH PLACE  
 City State Zip Code  
 OAK LAWN IL 60453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company SVP-APL-Chief Financial O  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 333.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301325**  
 Amount of Each Receipt this Period  
 66.60  
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. MARIO RIZZO**  
 Mailing Address 5926 W. 90TH PLACE  
 City State Zip Code  
 OAK LAWN IL 60453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company SVP-APL-Chief Financial O  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 399.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447604**  
 Amount of Each Receipt this Period  
 66.60  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 182.84  
**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 55 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. GREGORY C ROHLFING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1615 N 78th Ct  
 City Elmwood Park State IL Zip Code 60707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation L&R-Corp/Claim Lit Attorn  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 234.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301288**  
 Amount of Each Receipt this Period 46.90  
 Memo Item

**B. GREGORY C ROHLFING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1615 N 78th Ct  
 City Elmwood Park State IL Zip Code 60707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation L&R-Corp/Claim Lit Attorn  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447567**  
 Amount of Each Receipt this Period 46.90  
 Memo Item

**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 ATSV-Manager-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 219.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301352**  
 Amount of Each Receipt this Period 43.97  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	137.77
<b>TOTAL</b> This Period (last page this line number 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 84  
(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. 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 ATSV-Manager-Dir  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 263.82

Date of Receipt 03 / 18 / 2016  
Transaction ID : A2016-447632  
Amount of Each Receipt this Period 43.97  
 Memo Item

**B. John Rugel**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10 Lancelot Lane  
City Hawthorn Woods State IL Zip Code 60047  
FEC ID number of contributing federal political committee. C  
Name of Employer Allstate Insurance Company Occupation SVP-ABO-Life UW & Claims  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 290.00

Date of Receipt 03 / 04 / 2016  
Transaction ID : A2016-301489  
Amount of Each Receipt this Period 58.00  
 Memo Item

**C. John Rugel**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10 Lancelot Lane  
City Hawthorn Woods State IL Zip Code 60047  
FEC ID number of contributing federal political committee. C  
Name of Employer Allstate Insurance Company Occupation SVP-ABO-Life UW & Claims  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 348.00

Date of Receipt 03 / 18 / 2016  
Transaction ID : A2016-447767  
Amount of Each Receipt this Period 58.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 159.97  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 84
	<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 R RYSKE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 898 LONGWOOD DR.  
City LAKE FOREST State IL Zip Code 60045  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation L&R-Spcl Ops Attorney-Dir  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 233.65

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301287**  
Amount of Each Receipt this Period 46.73  
 Memo Item

**B. PAUL R RYSKE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 898 LONGWOOD DR.  
City LAKE FOREST State IL Zip Code 60045  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation L&R-Spcl Ops Attorney-Dir  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.38

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447566**  
Amount of Each Receipt this Period 46.73  
 Memo Item

**C. 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 VP-APL-Strategic Dist. Bu  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 295.40

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301477**  
Amount of Each Receipt this Period 59.08  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 152.54  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<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. 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 VP-APL-Strategic Dist. Bu  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 354.48

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447755**  
Amount of Each Receipt this Period 59.08  
 Memo Item

**B. STEPHEN E SCHOLL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 COPPERFIELD DRIVE  
City HAWTHORN WOODS State IL Zip Code 60047  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation VP-HR-HR Business Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 305.20

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301240**  
Amount of Each Receipt this Period 61.04  
 Memo Item

**C. STEPHEN E SCHOLL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 COPPERFIELD DRIVE  
City HAWTHORN WOODS State IL Zip Code 60047  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation VP-HR-HR Business Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 366.24

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447520**  
Amount of Each Receipt this Period 61.04  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 181.16  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 84
	<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 SVP-FSS-Internal Auditing
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.90

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301324**

Amount of Each Receipt this Period  
58.38

Memo Item

**B. 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 SVP-FSS-Internal Auditing
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.28

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447603**

Amount of Each Receipt this Period  
58.38

Memo Item

**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-ABD-Field Senior Vice
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
279.55

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301398**

Amount of Each Receipt this Period  
55.91

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	172.67
<b>TOTAL</b> This Period (last page this line 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 84
	<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. 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-ABD-Field Senior Vice  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.46

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447677**  
 Amount of Each Receipt this Period 55.91  
 Memo Item

**B. STACY Y SHARPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 N. Lake Shore Drive  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-CR-Strategic & Consum  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 292.60

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301348**  
 Amount of Each Receipt this Period 58.52  
 Memo Item

**C. STACY Y SHARPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 N. Lake Shore Drive  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-CR-Strategic & Consum  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.12

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447628**  
 Amount of Each Receipt this Period 58.52  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	172.95
<b>TOTAL</b> This Period (last page this line 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 84
	<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 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 EVP-FSS-Chief Financial O

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **865.40**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2016**

**Transaction ID : A2016-301330**

Amount of Each Receipt this Period  
**173.08**

Memo Item

**B. 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 EVP-FSS-Chief Financial O

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1038.48**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-447609**

Amount of Each Receipt this Period  
**173.08**

Memo Item

**C. ROBERT L SIMMONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1146 39th Ave NE

City St Petersburg State FL Zip Code 33703

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

Name of Employer Allstate Insurance Company Occupation L&R-Gov & Ind Rel Attorne

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **222.54**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-447511**

Amount of Each Receipt this Period  
**37.09**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>383.25</b>
<b>TOTAL</b> This Period (last page this line 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 62 OF 84
	<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. 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 L&R-Ins Ops Attorney-Sr E  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
238.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2016  
**Transaction ID : A2016-447681**  
Amount of Each Receipt this Period  
39.75  
 Memo Item

**B. 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-PO-Product Operations  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
499.10

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2016  
**Transaction ID : A2016-301393**  
Amount of Each Receipt this Period  
99.82  
 Memo Item

**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-PO-Product Operations  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
598.92

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2016  
**Transaction ID : A2016-447673**  
Amount of Each Receipt this Period  
99.82  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	239.39
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<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. 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 ▼ 201.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301366**

Amount of Each Receipt this Period  
 40.36

Memo Item

**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 ▼ 242.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447646**

Amount of Each Receipt this Period  
 40.36

Memo Item

**C. MARY SPRINGBERG**  
Full Name (Last, First, Middle Initial)

Mailing Address 4745 KINGS WAY - NORTH

City GURNEE State IL Zip Code 60031

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

Name of Employer Allstate Insurance Company Occupation VP-ATSV-Bus Prtn-Product

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 311.55

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301279**

Amount of Each Receipt this Period  
 62.31

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 143.03

**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 64 OF 84
	<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 SPRINGBERG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4745 KINGS WAY - NORTH

City GURNEE	State IL	Zip Code 60031
----------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation VP-ATSV-Bus Prtn-Product
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373.86

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447558**

Amount of Each Receipt this Period  
62.31

Memo Item

**B. GARY S STERE**  
Full Name (Last, First, Middle Initial)  
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 L&R-Ins Ops Attorney-Dir
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.25

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : A2016-301268**

Amount of Each Receipt this Period  
45.45

Memo Item

**C. GARY S STERE**  
Full Name (Last, First, Middle Initial)  
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 L&R-Ins Ops Attorney-Dir
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
272.70

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : A2016-447547**

Amount of Each Receipt this Period  
45.45

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	153.21
<b>TOTAL</b> This Period (last page this line number 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 84  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Allstate Insurance Company PAC**

**A. SHANTELLE A THOMAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 906 N. Vail Ave.  
 City State Zip Code  
 Arlington Heights IL 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-FSS-Insurance Claims R  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301448**  
 Amount of Each Receipt this Period  
 58.00  
 Memo Item

**B. SHANTELLE A THOMAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 906 N. Vail Ave.  
 City State Zip Code  
 Arlington Heights IL 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company VP-FSS-Insurance Claims R  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 348.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447726**  
 Amount of Each Receipt this Period  
 58.00  
 Memo Item

**C. GERALYN A THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6906 S. BENNETT  
 City State Zip Code  
 CHICAGO IL 60649  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company CR-Strategic Bus Comm-Sr  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447598**  
 Amount of Each Receipt this Period  
 35.13  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ► 151.13  
**TOTAL** This Period (last page this line number only)..... ►



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 84
	<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. MELINDA S TUNNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 190 West Johnson Street  
 City Palatine State IL Zip Code 60067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation VP-ABD-Sales Programs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447686**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**B. THOMAS P TUZAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 443 HUNTINGTON LANE  
 City ELMHURST State IL Zip Code 60126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation Claims-Sup & Proc Des-Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 218.32

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447611**  
 Amount of Each Receipt this Period 24.00  
 Memo Item

**C. WILLIAM A VAINISI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 636 BALMORAL LANE  
 City INVERNESS State IL Zip Code 60067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-L&R-Government & Indu  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.15

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301328**  
 Amount of Each Receipt this Period 66.23  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 148.23  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 84
	<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. WILLIAM A VAINISI**

Mailing Address **636 BALMORAL LANE**

City **INVERNESS** State **IL** Zip Code **60067**

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

Name of Employer **Allstate Insurance Company** Occupation **SVP-L&R-Government & Indu**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **397.38**

Date of Receipt  
**03 / 18 / 2016**  
**Transaction ID : A2016-447607**

Amount of Each Receipt this Period  
**66.23**

Memo Item

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

Mailing Address **9725 Woods Drive**

City **Skokie** State **IL** Zip Code **60077**

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

Name of Employer **Allstate Insurance Company** Occupation **SVP-APL-Field Business Co**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **367.95**

Date of Receipt  
**03 / 04 / 2016**  
**Transaction ID : A2016-301427**

Amount of Each Receipt this Period  
**73.59**

Memo Item

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

Mailing Address **9725 Woods Drive**

City **Skokie** State **IL** Zip Code **60077**

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

Name of Employer **Allstate Insurance Company** Occupation **SVP-APL-Field Business Co**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **441.54**

Date of Receipt  
**03 / 18 / 2016**  
**Transaction ID : A2016-447705**

Amount of Each Receipt this Period  
**73.59**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **213.41**

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

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

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

FOR LINE NUMBER: PAGE 69 OF 84  
(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. 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-MKTG-eBusiness & Dire  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **369.20**

Date of Receipt **03 / 04 / 2016**  
**Transaction ID : A2016-301475**  
Amount of Each Receipt this Period **73.84**  
 Memo Item

**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-MKTG-eBusiness & Dire  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **443.04**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-447753**  
Amount of Each Receipt this Period **73.84**  
 Memo Item

**C. Mary P Weiss**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5209 Westwood Drive  
City Bethesda State MD Zip Code 20816  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Allstate Insurance Company Occupation VP-L&R-Legislative & Regu  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **975.40**

Date of Receipt **03 / 04 / 2016**  
**Transaction ID : A2016-301500**  
Amount of Each Receipt this Period **195.08**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **342.76**  
**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 70 OF 84
	<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. Mary P Weiss**

Mailing Address 5209 Westwood Drive

City State Zip Code  
Bethesda MD 20816

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1170.48

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2016  
**Transaction ID : A2016-447778**

Amount of Each Receipt this Period  
195.08

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CYNTHIA M WHITFIELD**

Mailing Address 298 Keswick Grove Lane

City State Zip Code  
Franklin TN 37067

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2016  
**Transaction ID : A2016-301229**

Amount of Each Receipt this Period  
58.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CYNTHIA M WHITFIELD**

Mailing Address 298 Keswick Grove Lane

City State Zip Code  
Franklin TN 37067

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
348.00

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2016  
**Transaction ID : A2016-447509**

Amount of Each Receipt this Period  
58.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	311.08
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<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 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 VP-PF-Insurance Operation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.55

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301303**

Amount of Each Receipt this Period  
 47.51

Memo Item

**B. 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 VP-PF-Insurance Operation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.06

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447582**

Amount of Each Receipt this Period  
 47.51

Memo Item

**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 L&R-Gov & Ind Rel Attorne

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301320**

Amount of Each Receipt this Period  
 58.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 153.02

**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 72 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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. 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 L&R-Gov & Ind Rel Attorne  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447599**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**B. THOMAS J WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2024 N. MOHAWK  
 City CHICAGO State IL Zip Code 60614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1384.60

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301389**  
 Amount of Each Receipt this Period 276.92  
 Memo Item

**C. THOMAS J WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2024 N. MOHAWK  
 City CHICAGO State IL Zip Code 60614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1661.52

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447669**  
 Amount of Each Receipt this Period 276.92  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	611.84
<b>TOTAL</b> This Period (last page this line 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 84
	<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. Matthew E Winter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 70 Ferncliff Drive  
 City West Hartford State CT Zip Code 06117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation EVP-APL-Pres. The Allstat  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 923.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301478**  
 Amount of Each Receipt this Period  
 184.62  
 Memo Item

**B. Matthew E Winter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 70 Ferncliff Drive  
 City West Hartford State CT Zip Code 06117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation EVP-APL-Pres. The Allstat  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1107.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447756**  
 Amount of Each Receipt this Period  
 184.62  
 Memo Item

**C. ANGELA K WOIROL**  
 Full Name (Last, First, Middle Initial)  
 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 ABD-Field Admin-Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 218.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301415**  
 Amount of Each Receipt this Period  
 43.78  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	413.02
<b>TOTAL</b> This Period (last page this line 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 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<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. ANGELA K WOIROL**  
Full Name (Last, First, Middle Initial)

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 ABD-Field Admin-Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447693**

Amount of Each Receipt this Period  
 43.78

Memo Item

**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-APL-Chief Data Office

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301343**

Amount of Each Receipt this Period  
 66.75

Memo Item

**C. 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-APL-Chief Data Office

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447623**

Amount of Each Receipt this Period  
 66.75

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	177.28
<b>TOTAL</b> This Period (last page this line 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 84
	<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. NOEL C YOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10936 E. Butherus Drive  
 City State Zip Code  
 Scottsdale AZ 85255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company L&R-Gov & Ind Rel Attorne  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 228.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447684**  
 Amount of Each Receipt this Period  
 38.06  
 Memo Item

**B. MARY E ZAGORSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2609 N PINE AVE  
 City State Zip Code  
 ARLINGTON HEIGHTS IL 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company Encp-Operations-Dir  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 227.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301342**  
 Amount of Each Receipt this Period  
 45.42  
 Memo Item

**C. MARY E ZAGORSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2609 N PINE AVE  
 City State Zip Code  
 ARLINGTON HEIGHTS IL 60004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Allstate Insurance Company Encp-Operations-Dir  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 272.52

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447622**  
 Amount of Each Receipt this Period  
 45.42  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	128.90
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 84
	<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 ZEMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2004 PEACHTREE LANE

City ARLINGTON HEIGH State IL Zip Code 60004

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

Name of Employer Allstate Insurance Company Occupation L&R-Gov & Ind Rel Attorne

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301460**

Amount of Each Receipt this Period 58.00

Memo Item

**B. ROBERT L ZEMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2004 PEACHTREE LANE

City ARLINGTON HEIGH State IL Zip Code 60004

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

Name of Employer Allstate Insurance Company Occupation L&R-Gov & Ind Rel Attorne

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 348.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-447738**

Amount of Each Receipt this Period 58.00

Memo Item

**C. GERALD L ZIMMERMAN JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 2584 Sutton Lane

City AURORA State IL Zip Code 60502

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

Name of Employer Allstate Insurance Company Occupation L&R-Gov & Ind Rel Attorne

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 391.70

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301397**

Amount of Each Receipt this Period 78.34

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 194.34

**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: (check only one)	PAGE 77 OF 84
	<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. GERALD L ZIMMERMAN JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2584 Sutton Lane  
 City AURORA State IL Zip Code 60502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation L&R-Gov & Ind Rel Attorne  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447676**  
 Amount of Each Receipt this Period 78.34  
 Memo Item

**B. CARLA A ZUNIGA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2189 N. BEAVER CREEK DRIVE  
 City VERNON HILLS State IL Zip Code 60061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-ABO-Operations Suppor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301428**  
 Amount of Each Receipt this Period 50.48  
 Memo Item

**C. CARLA A ZUNIGA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2189 N. BEAVER CREEK DRIVE  
 City VERNON HILLS State IL Zip Code 60061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allstate Insurance Company Occupation SVP-ABO-Operations Suppor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 302.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-447706**  
 Amount of Each Receipt this Period 50.48  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	179.30
<b>TOTAL</b> This Period (last page this line number only).....▶	13724.40

**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  
Bank Service Charge

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B597355**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

**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. Carlos Curbelo Congress**

Mailing Address 824 S. Milledge Ave. Ste 101

City Athens State GA Zip Code 30605

Purpose of Disbursement  
Contribution

011

Candidate Name

**Carlos Curbelo**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: FL District: 26

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : B595640**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Cheri Bustos**

Mailing Address 3701 Porter Street NW

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Contribution

011

Candidate Name

**Cheri Bustos**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 17

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : B595642**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. LaHood for Congress**

Mailing Address 5827 Colfax Avenue

City Alexandria State VA Zip Code 22311

Purpose of Disbursement  
Contribution

011

Candidate Name

**Darin LaHood**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 18

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : B595641**

Amount of Each Disbursement this Period

500.00

Memo Item

**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. Roskam for Congress**

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution

011

Candidate Name

**Peter J Roskam**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IL District: 06

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2016

**Transaction ID : B595643**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Dold for Congress**

Mailing Address 1001 Pennsylvania Avenue NW Suite

City Washington State DC Zip Code 20004

Purpose of Disbursement Contribution

011

Candidate Name

**Bob Dold**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IL District: 10

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2016

**Transaction ID : B597129**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hoosiers First**

Mailing Address 1433 R Street NW #2

City Washington State DC Zip Code 20009

Purpose of Disbursement Contribution

011

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2016

**Transaction ID : B597130**

Amount of Each Disbursement this Period

1500.00

Memo Item

**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. Luke Messer for Congress**

Mailing Address 1001 Pennsylvania Avenue NW Suite

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Contribution

011

Candidate Name

**Luke Messer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IN District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2016

**Transaction ID : B597128**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Andy Barr for Congress**

Mailing Address 402 A South Capitol St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Andy Barr**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: KY District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : B595639**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Alma Adams for Congress**

Mailing Address 1289 Fordham Blvd. Suite 197

City Chapel Hill State NC Zip Code 27514

Purpose of Disbursement  
Contribution

011

Candidate Name

**Alma Shealey Adams**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NC District: 12

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : B595638**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

3500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. OIIPAC**

Mailing Address 172 E. State Street Suite 201

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
State PAC

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B595645**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hackett for Ohio**

Mailing Address 2050 Palouse Drive

City London State OH Zip Code 43140

Purpose of Disbursement  
P-2016 State Senate 10 OH

Category/  
Type

Candidate Name

**Bob Hackett**

Office Sought:  House  Senate  President  
State: OH District: 10

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : B595644**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Don White**

Mailing Address P.O. Box 363

City Indiana State PA Zip Code 15701

Purpose of Disbursement  
P-2016 State Senate 41 PA

Category/  
Type

Candidate Name

**Donald C White**

Office Sought:  House  Senate  President  
State: PA District: 41

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : B595705**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Joe Scarnati**

Mailing Address P.O. Box 33

City Youngsville State PA Zip Code 16371

Purpose of Disbursement  
P-2016 State Senate 25 PA

011

Category/  
Type

Candidate Name

**Joseph B Scarnati III**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 25

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : B597733**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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

1000.00

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

2900.00