

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)
Check if different than previously reported. (ACC) Northbrook IL 60062

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / through / /

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

Type or Print Name of Treasurer Mario Rizzo

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Allstate Insurance Company PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		50461.20
(b) Cash on Hand at Beginning of Reporting Period.....	23639.23	
(c) Total Receipts (from Line 19)	21650.75	239570.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	45289.98	290031.57
7. Total Disbursements (from Line 31).....	32098.27	276839.86
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	13191.71	13191.71
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Allstate Insurance Company PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21199.23	174428.50
(ii) Unitemized	451.52	64641.87
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21650.75	239070.37
(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)	21650.75	239070.37
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	500.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	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))..... ▶	21650.75	239570.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	21650.75	239570.37

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	88.27	1071.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	88.27	1071.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	194500.00
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	273.08
(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	273.08
29. Other Disbursements	25510.00	80995.00
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)) ..	32098.27	276839.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32098.27	276839.86

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)	21650.75	239070.37
34. Total Contribution Refunds (from Line 28(d))	0.00	273.08
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21650.75	238797.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	88.27	1071.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	88.27	571.78

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

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

FOR LINE NUMBER: PAGE 6 OF 220
(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

Full Name (Last, First, Middle Initial)
A. REBECCA A ABEL
 Mailing Address 657 CORAL COURT
 City State Zip Code
 LINDENHURST IL 60046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Claims Senior Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.76

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007166
 Amount of Each Receipt this Period
 23.14

Full Name (Last, First, Middle Initial)
B. REBECCA A ABEL
 Mailing Address 657 CORAL COURT
 City State Zip Code
 LINDENHURST IL 60046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Claims Senior Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 484.90

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115705
 Amount of Each Receipt this Period
 23.14

Full Name (Last, First, Middle Initial)
C. ERNEST D ADAMS
 Mailing Address P O Box 105
 City State Zip Code
 Grayslake IL 60030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company ATO-Leader-Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 416.48

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006972
 Amount of Each Receipt this Period
 20.88

SUBTOTAL of Receipts This Page (optional)..... ▶ 67.16
TOTAL 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 220
	<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. ERNEST D ADAMS

Mailing Address P O Box 105

City Grayslake State IL Zip Code 60030

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **437.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115514

Amount of Each Receipt this Period
20.88

Full Name (Last, First, Middle Initial)
B. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City COLLEYVILLE State TX Zip Code 76034

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **327.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007097

Amount of Each Receipt this Period
16.35

Full Name (Last, First, Middle Initial)
C. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City COLLEYVILLE State TX Zip Code 76034

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **343.35**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115637

Amount of Each Receipt this Period
16.35

SUBTOTAL of Receipts This Page (optional)..... ▶ **53.58**

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

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

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

FOR LINE NUMBER: PAGE 9 OF 220
(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 P BADER

Mailing Address 438 MITCHELL DRIVE

City State Zip Code
 GRAYS LAKE IL 60030

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1623.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006897

Amount of Each Receipt this Period
 81.15

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

Mailing Address 438 MITCHELL DRIVE

City State Zip Code
 GRAYS LAKE IL 60030

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1704.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115439

Amount of Each Receipt this Period
 81.15

Full Name (Last, First, Middle Initial)
C. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code
 Scottsdale AZ 85255

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 452.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006898

Amount of Each Receipt this Period
 22.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.05

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

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

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

FOR LINE NUMBER: PAGE 10 OF 220
(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. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code
 Scottsdale AZ 85255

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 475.23

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115440

Amount of Each Receipt this Period
 22.75

Full Name (Last, First, Middle Initial)
B. Donald J Bailey

Mailing Address 27 Kitchell Road

City State Zip Code
 Morristown NJ 07960

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2430.63

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007190

Amount of Each Receipt this Period
 122.31

Full Name (Last, First, Middle Initial)
C. Donald J Bailey

Mailing Address 27 Kitchell Road

City State Zip Code
 Morristown NJ 07960

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2552.94

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115729

Amount of Each Receipt this Period
 122.31

SUBTOTAL of Receipts This Page (optional)..... ▶ 267.37

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

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

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

FOR LINE NUMBER: PAGE 11 OF 220
(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. 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 Senior Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 619.59

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007100
 Amount of Each Receipt this Period
 31.20

B. 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 Senior Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.79

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115640
 Amount of Each Receipt this Period
 31.20

C. GREGORY P BALDWIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Saddle Ridge 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 ATO-Manager-Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 815.85

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007090
 Amount of Each Receipt this Period
 41.04

SUBTOTAL of Receipts This Page (optional)..... ▶ 103.44
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 12 OF 220
(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. GREGORY P BALDWIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Saddle Ridge Ct.
 City State Zip Code
 Hawthorn Woods IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company ATO-Manager-Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 856.89

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115630
 Amount of Each Receipt this Period
 41.04

B. WILLIAM P BALLINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Blue Heron Way
 City State Zip Code
 Skillman NJ 08558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-PC-Agency Contact Cen
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 743.11

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006945
 Amount of Each Receipt this Period
 37.32

C. WILLIAM P BALLINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Blue Heron Way
 City State Zip Code
 Skillman NJ 08558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-PC-Agency Contact Cen
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 780.43

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115487
 Amount of Each Receipt this Period
 37.32

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.68
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 13 OF 220
(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. PHILLIP W BANET
 Full Name (Last, First, Middle Initial)
 Mailing Address 4589 JADE LANE
 City State Zip Code
 HOFFMAN ESTATES IL 60192
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Senior Actuary
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 780.19

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006977
 Amount of Each Receipt this Period
 39.14

B. PHILLIP W BANET
 Full Name (Last, First, Middle Initial)
 Mailing Address 4589 JADE LANE
 City State Zip Code
 HOFFMAN ESTATES IL 60192
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Senior Actuary
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 819.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115519
 Amount of Each Receipt this Period
 39.14

C. ROBERT H BARGE III III
 Full Name (Last, First, Middle Initial)
 Mailing Address 2222 LOCH WAY
 City State Zip Code
 EL DORADO HILLS CA 95762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-SAL-Field Senior Vice
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1588.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007164
 Amount of Each Receipt this Period
 79.94

SUBTOTAL of Receipts This Page (optional)..... ▶ 158.22
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 14 OF 220
(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. ROBERT H BARGE III III
 Full Name (Last, First, Middle Initial)
 Mailing Address 2222 LOCH WAY
 City State Zip Code
 EL DORADO HILLS CA 95762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-SAL-Field Senior Vice
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1668.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115703
 Amount of Each Receipt this Period
 79.94

B. ROBERT K BECKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Greensview Lane
 City State Zip Code
 Scotch Plains NJ 07076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-SAL-Field Senior Vice
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 584.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006909
 Amount of Each Receipt this Period
 29.43

C. ROBERT K BECKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Greensview Lane
 City State Zip Code
 Scotch Plains NJ 07076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-SAL-Field Senior Vice
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 614.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115451
 Amount of Each Receipt this Period
 29.43

SUBTOTAL of Receipts This Page (optional)..... ▶ 138.80
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 220
(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. DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City State Zip Code
 Arlington Heights IL 60004

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

Name of Employer Occupation
 Allstate Insurance Company Accounting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 446.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007009

Amount of Each Receipt this Period
 22.41

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

Mailing Address 1402 N. Illinois Avenue

City State Zip Code
 Arlington Heights IL 60004

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

Name of Employer Occupation
 Allstate Insurance Company Accounting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 468.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115551

Amount of Each Receipt this Period
 22.41

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

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code
 NAPERVILLE IL 60565

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

Name of Employer Occupation
 Allstate Insurance Company AFT-Architect-Expert

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 718.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007060

Amount of Each Receipt this Period
 36.23

SUBTOTAL of Receipts This Page (optional)..... ▶ 81.05

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

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

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

FOR LINE NUMBER: PAGE 16 OF 220
(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. WALTER A BERKOWICZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 GATESHEAD DRIVE
 City State Zip Code
 NAPERVILLE IL 60565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company AFT-Architect-Expert
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 754.58

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115600
 Amount of Each Receipt this Period
 36.23

B. EDWARD A BIEMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 Greenwood Ave.
 City State Zip Code
 GLENCOE IL 60022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-PRD-Product Line Mana
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 845.42

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006924
 Amount of Each Receipt this Period
 42.46

C. EDWARD A BIEMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 Greenwood Ave.
 City State Zip Code
 GLENCOE IL 60022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-PRD-Product Line Mana
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 887.88

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115466
 Amount of Each Receipt this Period
 42.46

SUBTOTAL of Receipts This Page (optional)..... ▶ 121.15
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 220
	<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. ROBERT W BIRMAN
Full Name (Last, First, Middle Initial)

Mailing Address 7533 WHITLOCK PLACE

City LINCORN State NE Zip Code 68516

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **379.73**

Date of Receipt
10 / 04 / 2013
Transaction ID : A2013-4007064

Amount of Each Receipt this Period
19.09

B. ROBERT W BIRMAN
Full Name (Last, First, Middle Initial)

Mailing Address 7533 WHITLOCK PLACE

City LINCORN State NE Zip Code 68516

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **398.82**

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115604

Amount of Each Receipt this Period
19.09

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

Mailing Address 398 Brookmont Lane

City North Barrington State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation SVP-FSS-Investor Relation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1337.95**

Date of Receipt
10 / 04 / 2013
Transaction ID : A2013-4007118

Amount of Each Receipt this Period
67.12

SUBTOTAL of Receipts This Page (optional)..... **105.30**

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

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

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

FOR LINE NUMBER: PAGE 18 OF 220
(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. ROBERT L BLOCK

Mailing Address 398 Brookmont Lane

City State Zip Code
 North Barrington IL 60010

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

Name of Employer Occupation
 Allstate Insurance Company SVP-FSS-Investor Relation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1405.07

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115657

Amount of Each Receipt this Period
 67.12

Full Name (Last, First, Middle Initial)
B. SUSAN F BOMBECK

Mailing Address 506 Blackhawk Ct

City State Zip Code
 Loomis CA 95650

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

Name of Employer Occupation
 Allstate Insurance Company Technical Claim Process S

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 310.56

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007167

Amount of Each Receipt this Period
 15.58

Full Name (Last, First, Middle Initial)
C. SUSAN F BOMBECK

Mailing Address 506 Blackhawk Ct

City State Zip Code
 Loomis CA 95650

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

Name of Employer Occupation
 Allstate Insurance Company Technical Claim Process S

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 326.14

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115706

Amount of Each Receipt this Period
 15.58

SUBTOTAL of Receipts This Page (optional)..... ▶ 98.28

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

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

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

FOR LINE NUMBER: PAGE 19 OF 220
(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. DOUGLAS L BORG

Mailing Address 2160 Red Setter Road

City State Zip Code
 Rocklin CA 95765

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

Name of Employer Occupation
 Allstate Insurance Company Financial Sales Consultan

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 668.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007162

Amount of Each Receipt this Period
 33.49

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

Mailing Address 2160 Red Setter Road

City State Zip Code
 Rocklin CA 95765

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

Name of Employer Occupation
 Allstate Insurance Company Financial Sales Consultan

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 701.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115701

Amount of Each Receipt this Period
 33.49

Full Name (Last, First, Middle Initial)
C. WILLIAM B BORST

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code
 ARLINGTON HTS IL 60004

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

Name of Employer Occupation
 Allstate Insurance Company VP-EB-Head of Stratetic G

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 517.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007008

Amount of Each Receipt this Period
 30.73

SUBTOTAL of Receipts This Page (optional)..... ▶ 97.71

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 20 OF 220
(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. WILLIAM B BORST

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code
 ARLINGTON HTS IL 60004

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

Name of Employer Occupation
 Allstate Insurance Company VP-EB-Head of Stratetic G

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **548.22**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115550

Amount of Each Receipt this Period
30.73

Full Name (Last, First, Middle Initial)
B. GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City State Zip Code
 LINCOLN NE 68526

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **332.24**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007141

Amount of Each Receipt this Period
16.74

Full Name (Last, First, Middle Initial)
C. GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City State Zip Code
 LINCOLN NE 68526

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **348.98**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115680

Amount of Each Receipt this Period
16.74

SUBTOTAL of Receipts This Page (optional)..... ▶ **64.21**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 220
	<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. LONDON B BRADLEY
Full Name (Last, First, Middle Initial)
Mailing Address 6350 S Langdale Way
City Aurora State CO Zip Code 80016
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Regional Sales Leader
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 740.41

Date of Receipt 10 / 04 / 2013
Transaction ID : A2013-4007147
Amount of Each Receipt this Period 37.25

B. LONDON B BRADLEY
Full Name (Last, First, Middle Initial)
Mailing Address 6350 S Langdale Way
City Aurora State CO Zip Code 80016
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Regional Sales Leader
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 777.66

Date of Receipt 10 / 18 / 2013
Transaction ID : A2013-4115686
Amount of Each Receipt this Period 37.25

C. KENNETH A BRANCH
Full Name (Last, First, Middle Initial)
Mailing Address 28955 NIBLICK KNOLL CT.
City IVANHOE State IL Zip Code 60060
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-AHA-Independent Channe
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.91

Date of Receipt 10 / 04 / 2013
Transaction ID : A2013-4007126
Amount of Each Receipt this Period 22.87

SUBTOTAL of Receipts This Page (optional)..... ▶ 97.37
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 220
	<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. KENNETH A BRANCH
Full Name (Last, First, Middle Initial)
Mailing Address 28955 NIBLICK KNOLL CT.
City IVANHOE State IL Zip Code 60060
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-AHA-Independent Channe
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 478.78

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115665
Amount of Each Receipt this Period
22.87

B. SHEILA M BREEDING
Full Name (Last, First, Middle Initial)
Mailing Address 35 FAIRMONT AVENUE
City SOMERVILLE State NJ Zip Code 08876
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Corp Rel Regional Sr Man
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 347.96

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4006912
Amount of Each Receipt this Period
17.56

C. SHEILA M BREEDING
Full Name (Last, First, Middle Initial)
Mailing Address 35 FAIRMONT AVENUE
City SOMERVILLE State NJ Zip Code 08876
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Corp Rel Regional Sr Man
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.52

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115454
Amount of Each Receipt this Period
17.56

SUBTOTAL of Receipts This Page (optional)..... ▶ 57.99
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 23 OF 220
	<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. DUDLEY R BRIGHT
Full Name (Last, First, Middle Initial)
Mailing Address 18135 W MEANDER DR
City GRAYSLAKE State IL Zip Code 60030
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Finance Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.85

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4006937
Amount of Each Receipt this Period
20.84

B. DUDLEY R BRIGHT
Full Name (Last, First, Middle Initial)
Mailing Address 18135 W MEANDER DR
City GRAYSLAKE State IL Zip Code 60030
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Finance Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 436.69

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115479
Amount of Each Receipt this Period
20.84

C. LORRIE K BROUSE
Full Name (Last, First, Middle Initial)
Mailing Address 223 POLK PLACE DRIVE
City FRANKLIN State TN Zip Code 37064
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Corporate Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 784.93

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4006954
Amount of Each Receipt this Period
39.42

SUBTOTAL of Receipts This Page (optional)..... ▶ 81.10
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 220
	<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. LORRIE K BROUSE
Full Name (Last, First, Middle Initial)

Mailing Address 223 POLK PLACE DRIVE

City FRANKLIN State TN Zip Code 37064

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **824.35**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115496

Amount of Each Receipt this Period
39.42

B. BETH A BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 2637 W. WILSON AVE.

City CHICAGO State IL Zip Code 60625

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **428.06**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006982

Amount of Each Receipt this Period
21.52

C. BETH A BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 2637 W. WILSON AVE.

City CHICAGO State IL Zip Code 60625

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **449.58**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115524

Amount of Each Receipt this Period
21.52

SUBTOTAL of Receipts This Page (optional)..... **82.46**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAMELA S BROWN		Date of Receipt
Mailing Address 5886 TEAL LANE		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code LONG GROVE IL 60047		Transaction ID : A2013-4007093
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.59"/>
Name of Employer Allstate Insurance Company	Occupation Corporate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="410.40"/>	

Full Name (Last, First, Middle Initial) B. PAMELA S BROWN		Date of Receipt
Mailing Address 5886 TEAL LANE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code LONG GROVE IL 60047		Transaction ID : A2013-4115633
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.59"/>
Name of Employer Allstate Insurance Company	Occupation Corporate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="430.99"/>	

Full Name (Last, First, Middle Initial) C. CATHERINE S BRUNE		Date of Receipt
Mailing Address 190 SAVANNA CT		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code LAKE FOREST IL 60045		Transaction ID : A2013-4006958
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="188.46"/>
Name of Employer Allstate Insurance Company	Occupation EVP-SAL-Regional Presiden	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3769.20"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="229.64"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 26 OF 220
(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. CATHERINE S BRUNE
 Mailing Address 190 SAVANNA CT
 City State Zip Code
 LAKE FOREST IL 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company EVP-SAL-Regional Presiden
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3957.66

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115500
 Amount of Each Receipt this Period
 188.46

Full Name (Last, First, Middle Initial)
B. ANNE MARIE L BRUNNER
 Mailing Address 2514 SOUTH WESLEY AVE
 City State Zip Code
 BERWYN IL 60402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 786.13

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007015
 Amount of Each Receipt this Period
 39.48

Full Name (Last, First, Middle Initial)
C. ANNE MARIE L BRUNNER
 Mailing Address 2514 SOUTH WESLEY AVE
 City State Zip Code
 BERWYN IL 60402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 825.61

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115557
 Amount of Each Receipt this Period
 39.48

SUBTOTAL of Receipts This Page (optional)..... ▶ 267.42
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 27 OF 220
(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 E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City State Zip Code
 WINFIELD IL 60190

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

Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 345.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007083

Amount of Each Receipt this Period
 17.39

Full Name (Last, First, Middle Initial)
B. JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City State Zip Code
 WINFIELD IL 60190

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

Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 362.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115623

Amount of Each Receipt this Period
 17.39

Full Name (Last, First, Middle Initial)
C. CHERI M BUCKLEY

Mailing Address 249 S. OLD CREEK RD

City State Zip Code
 VERNON HILLS IL 60061

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 251.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007088

Amount of Each Receipt this Period
 13.08

SUBTOTAL of Receipts This Page (optional)..... ▶ 47.86

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

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

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

FOR LINE NUMBER: PAGE 28 OF 220
(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. CHERI M BUCKLEY
 Mailing Address 249 S. OLD CREEK RD
 City State Zip Code
 VERNON HILLS IL 60061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company ATO-Manager-Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 264.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115628
 Amount of Each Receipt this Period
 13.08

Full Name (Last, First, Middle Initial)
B. MARK L BUKOWY
 Mailing Address 1077 Devon Drive
 City State Zip Code
 Antioch IL 60002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company ATO-Manager-Sr Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 328.91

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007012
 Amount of Each Receipt this Period
 16.52

Full Name (Last, First, Middle Initial)
C. MARK L BUKOWY
 Mailing Address 1077 Devon Drive
 City State Zip Code
 Antioch IL 60002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company ATO-Manager-Sr Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 345.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115554
 Amount of Each Receipt this Period
 16.52

SUBTOTAL of Receipts This Page (optional)..... ▶ 46.12
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 220
	<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. GREGORY C BURNS
Full Name (Last, First, Middle Initial)

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code
VERNON HILLS IL 60061

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
842.92

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115471

Amount of Each Receipt this Period
56.54

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

Mailing Address 4121 109TH STREET

City State Zip Code
PLEASANT PRAIRI WI 53158

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1755.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007115

Amount of Each Receipt this Period
88.29

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

Mailing Address 4121 109TH STREET

City State Zip Code
PLEASANT PRAIRI WI 53158

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1843.29

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115654

Amount of Each Receipt this Period
88.29

SUBTOTAL of Receipts This Page (optional)..... ▶ 233.12

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

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

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

FOR LINE NUMBER: PAGE 31 OF 220
(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. Alfredo M Cantoral
 Full Name (Last, First, Middle Initial)
 Mailing Address 340 W Superior St
 City Chicago State IL Zip Code 60654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.28

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007195
 Amount of Each Receipt this Period
 25.71

B. Alfredo M Cantoral
 Full Name (Last, First, Middle Initial)
 Mailing Address 340 W Superior St
 City Chicago State IL Zip Code 60654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.99

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115734
 Amount of Each Receipt this Period
 25.71

C. VIRGINIA O CHIAPPETTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 165 ARLINGTON AVE
 City ELMHURST State IL Zip Code 60126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Communications-Manage
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.20

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007069
 Amount of Each Receipt this Period
 20.46

SUBTOTAL of Receipts This Page (optional)..... ▶ 71.88
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 32 OF 220
(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. VIRGINIA O CHIAPPETTA
 Mailing Address 165 ARLINGTON AVE
 City State Zip Code
 ELMHURST IL 60126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company ATO-Communications-Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 429.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115609
 Amount of Each Receipt this Period
 20.46

Full Name (Last, First, Middle Initial)
B. BRIAN L CLARK
 Mailing Address 257 Lake Circle
 City State Zip Code
 MADISON MS 39110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Finance Senior Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 347.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007125
 Amount of Each Receipt this Period
 18.49

Full Name (Last, First, Middle Initial)
C. BRIAN L CLARK
 Mailing Address 257 Lake Circle
 City State Zip Code
 MADISON MS 39110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Finance Senior Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 365.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115664
 Amount of Each Receipt this Period
 18.49

SUBTOTAL of Receipts This Page (optional)..... ▶ 57.44
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 33 OF 220
(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. EDWARD T CLARK

Mailing Address 2907 GLENARYE DR

City State Zip Code
 LINDENHURST IL 60046

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

Name of Employer Occupation
 Allstate Insurance Company Prod Ops State Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 569.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007074

Amount of Each Receipt this Period
 28.61

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

Mailing Address 2907 GLENARYE DR

City State Zip Code
 LINDENHURST IL 60046

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

Name of Employer Occupation
 Allstate Insurance Company Prod Ops State Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 598.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115614

Amount of Each Receipt this Period
 28.61

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

Mailing Address 9330 Malheur Way

City State Zip Code
 ELK GROVE CA 95758

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

Name of Employer Occupation
 Allstate Insurance Company Senior Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 704.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007180

Amount of Each Receipt this Period
 35.64

SUBTOTAL of Receipts This Page (optional)..... ▶ 92.86

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

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

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

FOR LINE NUMBER: PAGE 34 OF 220
(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 9330 Malheur Way
 City State Zip Code
 ELK GROVE CA 95758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Senior Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 740.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115719
 Amount of Each Receipt this Period
 35.64

B. MARK P CLOGHESSY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4343 LAWN AVE
 City State Zip Code
 WESTERN SPRINGS IL 60558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SMD-INV-International
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 768.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006978
 Amount of Each Receipt this Period
 38.40

C. MARK P CLOGHESSY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4343 LAWN AVE
 City State Zip Code
 WESTERN SPRINGS IL 60558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SMD-INV-International
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 806.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115520
 Amount of Each Receipt this Period
 38.40

SUBTOTAL of Receipts This Page (optional)..... ▶ 112.44
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 35 OF 220
	<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. 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 Marketing Regional Sr Mgr
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.04**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007072

Amount of Each Receipt this Period

32.18

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 Marketing Regional Sr Mgr
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **672.22**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115612

Amount of Each Receipt this Period

32.18

C. LISA D COCHRANE
Full Name (Last, First, Middle Initial)
Mailing Address 270 FAIRVIEW AVENUE

City WINNETKA	State IL	Zip Code 60093
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **758.97**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007042

Amount of Each Receipt this Period

38.18

SUBTOTAL of Receipts This Page (optional).....▶	102.54
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 OF 220
	(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. LISA D COCHRANE
Full Name (Last, First, Middle Initial)

Mailing Address 270 FAIRVIEW AVENUE

City WINNETKA State IL Zip Code 60093

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **797.15**

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115583

Amount of Each Receipt this Period
38.18

B. PATRICK E COCHRANE
Full Name (Last, First, Middle Initial)

Mailing Address 6911 Brimstone Lane

City Fairfax Station State VA Zip Code 22039

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

Name of Employer Allstate Insurance Company Occupation HR-Client Partner Field B

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.84**

Date of Receipt
10 / 04 / 2013
Transaction ID : A2013-4006952

Amount of Each Receipt this Period
16.67

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

Mailing Address 6911 Brimstone Lane

City Fairfax Station State VA Zip Code 22039

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

Name of Employer Allstate Insurance Company Occupation HR-Client Partner Field B

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **347.51**

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115494

Amount of Each Receipt this Period
16.67

SUBTOTAL of Receipts This Page (optional)..... **71.52**

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

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

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

FOR LINE NUMBER: PAGE 37 OF 220
(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. PATRICIA A COFFEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 21200 W. KEPWICK
 City State Zip Code
 KILDEER IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-ATO-Bus Prtn-Shared S
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 552.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007045
 Amount of Each Receipt this Period
 34.63

B. PATRICIA A COFFEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 21200 W. KEPWICK
 City State Zip Code
 KILDEER IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-ATO-Bus Prtn-Shared S
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 587.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115586
 Amount of Each Receipt this Period
 34.63

C. EDWARD T COLLINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 809 DUNHILL COURT
 City State Zip Code
 GURNEE IL 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-LGL-Public Policy Deve
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 998.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007006
 Amount of Each Receipt this Period
 50.41

SUBTOTAL of Receipts This Page (optional)..... ▶ 119.67
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 38 OF 220
(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. EDWARD T COLLINS
 Mailing Address 809 DUNHILL COURT
 City State Zip Code
 GURNEE IL 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-LGL-Public Policy Deve
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1048.84

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115548
 Amount of Each Receipt this Period
 50.41

Full Name (Last, First, Middle Initial)
B. LARRY K CONLEE
 Mailing Address 363 Kensington Ct.
 City State Zip Code
 Palatine IL 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Senior Actuary
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 408.58

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007033
 Amount of Each Receipt this Period
 20.53

Full Name (Last, First, Middle Initial)
C. LARRY K CONLEE
 Mailing Address 363 Kensington Ct.
 City State Zip Code
 Palatine IL 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Senior Actuary
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 429.11

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115574
 Amount of Each Receipt this Period
 20.53

SUBTOTAL of Receipts This Page (optional)..... ▶ 91.47
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 220
	<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. PETER T CORRIGAN
Full Name (Last, First, Middle Initial)

Mailing Address 28852 FOREST LAKE LANE

City GREEN OAKS State IL Zip Code 60048

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1267.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006894

Amount of Each Receipt this Period
 63.78

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

Mailing Address 28852 FOREST LAKE LANE

City GREEN OAKS State IL Zip Code 60048

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1331.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115437

Amount of Each Receipt this Period
 63.78

C. ERROL CRAMER
Full Name (Last, First, Middle Initial)

Mailing Address 1111 SARANAC AVE.

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation VP-AF-Chief Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007047

Amount of Each Receipt this Period
 18.89

SUBTOTAL of Receipts This Page (optional)..... ▶ 146.45

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

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

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

FOR LINE NUMBER: PAGE 40 OF 220
(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. ERROL CRAMER
 Mailing Address 1111 SARANAC AVE.
 City NORTHBROOK State IL Zip Code 60062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-AF-Chief Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **394.44**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115588
 Amount of Each Receipt this Period
18.89

Full Name (Last, First, Middle Initial)
B. RICHARD C CRIST Jr.
 Mailing Address 252 Center Point Lane
 City Lansdale State PA Zip Code 19446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1477.70**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006934
 Amount of Each Receipt this Period
74.13

Full Name (Last, First, Middle Initial)
C. RICHARD C CRIST Jr.
 Mailing Address 252 Center Point Lane
 City Lansdale State PA Zip Code 19446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SAL-Field Senior Vice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1551.83**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115476
 Amount of Each Receipt this Period
74.13

SUBTOTAL of Receipts This Page (optional)..... ▶ **167.15**
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 41 OF 220
(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. ROBERT W DANIELS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1020 Pleasant Street #1
 City State Zip Code
 Oak Park IL 60302
 Date of Receipt: 10 / 04 / 2013
Transaction ID : A2013-4006953
 Amount of Each Receipt this Period: 39.79
 FEC ID number of contributing federal political committee: C
 Name of Employer: Allstate Insurance Company Occupation: Corp Rel Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 793.14

B. ROBERT W DANIELS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1020 Pleasant Street #1
 City State Zip Code
 Oak Park IL 60302
 Date of Receipt: 10 / 18 / 2013
Transaction ID : A2013-4115495
 Amount of Each Receipt this Period: 39.79
 FEC ID number of contributing federal political committee: C
 Name of Employer: Allstate Insurance Company Occupation: Corp Rel Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 832.93

C. JOHN A DAVISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2104 Butternut Ln
 City State Zip Code
 NORTHBROOK IL 60062
 Date of Receipt: 10 / 04 / 2013
Transaction ID : A2013-4006963
 Amount of Each Receipt this Period: 18.23
 FEC ID number of contributing federal political committee: C
 Name of Employer: Allstate Insurance Company Occupation: Claims Senior Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 362.98

SUBTOTAL of Receipts This Page (optional)..... ▶ 97.81
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 OF 220
(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. JOHN A DAVISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2104 Butternut Ln
 City NORTHBROOK State IL Zip Code 60062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Claims Senior Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 381.21

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115505
 Amount of Each Receipt this Period
 18.23

B. RANDALL S DECOURSEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1954 Oakwood Dr
 City Arlington Heights State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-AF-Contact Center Impl
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 995.82

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007007
 Amount of Each Receipt this Period
 43.68

C. RANDALL S DECOURSEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1954 Oakwood Dr
 City Arlington Heights State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-AF-Contact Center Impl
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1039.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115549
 Amount of Each Receipt this Period
 43.68

SUBTOTAL of Receipts This Page (optional)..... ► 105.59
TOTAL This Period (last page this line number only)..... ►

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

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

FOR LINE NUMBER: PAGE 43 OF 220
(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. STEVEN J DEGNAN-SCHMIDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1320 MULBERRY LN.
 City CARY State IL Zip Code 60013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Manager-Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 842.86

Date of Receipt 10 / 04 / 2013
Transaction ID : A2013-4006970
 Amount of Each Receipt this Period 42.33

B. STEVEN J DEGNAN-SCHMIDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1320 MULBERRY LN.
 City CARY State IL Zip Code 60013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Manager-Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 885.19

Date of Receipt 10 / 18 / 2013
Transaction ID : A2013-4115512
 Amount of Each Receipt this Period 42.33

C. JEFFREY F DEIGL
 Full Name (Last, First, Middle Initial)
 Mailing Address 453 PRAIRIE
 City ELMHURST State IL Zip Code 60126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-PRD-Product Vice Presi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1118.43

Date of Receipt 10 / 04 / 2013
Transaction ID : A2013-4007087
 Amount of Each Receipt this Period 56.07

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.73
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 44 OF 220
(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. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
 ELMHURST IL 60126

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1174.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115627

Amount of Each Receipt this Period
 56.07

Full Name (Last, First, Middle Initial)
B. DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City State Zip Code
 BARRINGTON IL 60010

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

Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 448.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007067

Amount of Each Receipt this Period
 22.50

Full Name (Last, First, Middle Initial)
C. DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City State Zip Code
 BARRINGTON IL 60010

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

Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 470.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115607

Amount of Each Receipt this Period
 22.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 101.07

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 45 OF 220
	<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. Kristine DiGirolamo
Full Name (Last, First, Middle Initial)

Mailing Address 10123 NORTH RIVER ROAD

City BARRINGTON HILLS State IL Zip Code 60102

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

Name of Employer Allstate Insurance Company Occupation Compliance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **418.48**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007116

Amount of Each Receipt this Period
21.05

B. Kristine DiGirolamo
Full Name (Last, First, Middle Initial)

Mailing Address 10123 NORTH RIVER ROAD

City BARRINGTON HILLS State IL Zip Code 60102

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

Name of Employer Allstate Insurance Company Occupation Compliance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **439.53**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115655

Amount of Each Receipt this Period
21.05

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

Mailing Address 421 Chapel Hill Lane

City Northfield State IL Zip Code 60093

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

Name of Employer Allstate Insurance Company Occupation VP-CR-Public Social Respo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1173.29**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007181

Amount of Each Receipt this Period
59.02

SUBTOTAL of Receipts This Page (optional)..... ▶ **101.12**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 220
	<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. Victoria A Dinges

Mailing Address 421 Chapel Hill Lane

City Northfield State IL Zip Code 60093

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

Name of Employer Allstate Insurance Company Occupation VP-CR-Public Social Respo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1232.31

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115720

Amount of Each Receipt this Period
 59.02

Full Name (Last, First, Middle Initial)
B. SARAH R DONAHUE

Mailing Address 4147 RFD

City LONG GROVE State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation VP-AF-Program Mgmt Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1214.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007068

Amount of Each Receipt this Period
 60.86

Full Name (Last, First, Middle Initial)
C. SARAH R DONAHUE

Mailing Address 4147 RFD

City LONG GROVE State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation VP-AF-Program Mgmt Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1275.36

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115608

Amount of Each Receipt this Period
 60.86

SUBTOTAL of Receipts This Page (optional).....▶	180.74
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 47 OF 220
(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. BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
 Lincolnwood IL 60712

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

Name of Employer Occupation
 Allstate Insurance Company Senior Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 425.05

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007138

Amount of Each Receipt this Period
 21.30

Full Name (Last, First, Middle Initial)
B. BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
 Lincolnwood IL 60712

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

Name of Employer Occupation
 Allstate Insurance Company Senior Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 446.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115677

Amount of Each Receipt this Period
 21.30

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

Mailing Address 1706 ADLER LANE

City State Zip Code
 MALVERN PA 19355

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

Name of Employer Occupation
 Allstate Insurance Company Claims Field Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 427.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006936

Amount of Each Receipt this Period
 21.57

SUBTOTAL of Receipts This Page (optional)..... ▶ 64.17

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 220
	<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. DANIEL C DRESSEL		Date of Receipt
Mailing Address 1706 ADLER LANE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code MALVERN PA 19355		Transaction ID : A2013-4115478
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="21.57"/>
Name of Employer Allstate Insurance Company	Occupation Claims Field Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="449.46"/>	

Full Name (Last, First, Middle Initial) B. PATRICIA B DREXLER		Date of Receipt
Mailing Address 472 W. SYCAMORE ST.		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code VERNON HILLS IL 60061		Transaction ID : A2013-4006992
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="31.47"/>
Name of Employer Allstate Insurance Company	Occupation Marketing Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="622.02"/>	

Full Name (Last, First, Middle Initial) C. PATRICIA B DREXLER		Date of Receipt
Mailing Address 472 W. SYCAMORE ST.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code VERNON HILLS IL 60061		Transaction ID : A2013-4115534
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="31.47"/>
Name of Employer Allstate Insurance Company	Occupation Marketing Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="653.49"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="84.51"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 49 OF 220
(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. SUSAN DUCHAK
 Mailing Address 4815 HIGHLAND AVE.
 City State Zip Code
 DOWNERS GROVE IL 60515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corp Rel Sr Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 294.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007176
 Amount of Each Receipt this Period
 14.88

Full Name (Last, First, Middle Initial)
B. SUSAN DUCHAK
 Mailing Address 4815 HIGHLAND AVE.
 City State Zip Code
 DOWNERS GROVE IL 60515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corp Rel Sr Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 309.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115715
 Amount of Each Receipt this Period
 14.88

Full Name (Last, First, Middle Initial)
C. DONALD L DUFF
 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 Product Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 643.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006990
 Amount of Each Receipt this Period
 32.67

SUBTOTAL of Receipts This Page (optional)..... ▶ 62.43
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DONALD L DUFF		Date of Receipt
Mailing Address 2 Washington Ct..		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
STREAMWOOD	IL	60107
FEC ID number of contributing federal political committee.		Transaction ID : A2013-411532
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="32.67"/>
Name of Employer	Occupation	
Allstate Insurance Company	Product Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="676.44"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MICHAEL S DUNN		Date of Receipt
Mailing Address 18202 HARNISH RD.		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
ROSCOE	IL	61073
FEC ID number of contributing federal political committee.		Transaction ID : A2013-4007053
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="28.32"/>
Name of Employer	Occupation	
Allstate Insurance Company	Staff Claims Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="562.71"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MICHAEL S DUNN		Date of Receipt
Mailing Address 18202 HARNISH RD.		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
ROSCOE	IL	61073
FEC ID number of contributing federal political committee.		Transaction ID : A2013-411594
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="28.32"/>
Name of Employer	Occupation	
Allstate Insurance Company	Staff Claims Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="591.03"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="89.31"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 220
	<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. LAURA DUNNE		Date of Receipt
Mailing Address 1860 Admiral Court		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code GLENVIEW IL 60026		Transaction ID : A2013-4007055
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.27"/>
Name of Employer Allstate Insurance Company	Occupation VP-ENC-Strategy & Project	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="501.80"/>	

Full Name (Last, First, Middle Initial) B. LAURA DUNNE		Date of Receipt
Mailing Address 1860 Admiral Court		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code GLENVIEW IL 60026		Transaction ID : A2013-4115595
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.27"/>
Name of Employer Allstate Insurance Company	Occupation VP-ENC-Strategy & Project	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="527.07"/>	

Full Name (Last, First, Middle Initial) C. DOUGLAS P DUPONT		Date of Receipt
Mailing Address 12 ESSEX LANE		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code LINCOLNSHIRE IL 60069		Transaction ID : A2013-4007110
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="29.38"/>
Name of Employer Allstate Insurance Company	Occupation MD-INV-Portfolio Manageme	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="587.60"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="79.92"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 220
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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. DOUGLAS P DUPONT		Date of Receipt
Mailing Address 12 ESSEX LANE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code LINCOLNSHIRE IL 60069		Transaction ID : A2013-4115649
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="29.38"/>
Name of Employer Allstate Insurance Company	Occupation MD-INV-Portfolio Manageme	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="616.98"/>	

Full Name (Last, First, Middle Initial) B. JEFFREY P DWYER		Date of Receipt
Mailing Address 44 CHAMPLAIN COURT		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code MANAHAWKIN NJ 08050		Transaction ID : A2013-4006893
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.54"/>
Name of Employer Allstate Insurance Company	Occupation Market Claim Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="309.90"/>	

Full Name (Last, First, Middle Initial) C. JEFFREY P DWYER		Date of Receipt
Mailing Address 44 CHAMPLAIN COURT		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code MANAHAWKIN NJ 08050		Transaction ID : A2013-4115436
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.54"/>
Name of Employer Allstate Insurance Company	Occupation Market Claim Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="325.44"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.46"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 53 OF 220
(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. Thomas V Ealy

Mailing Address 1541 West Wolfram Street

City State Zip Code
 Chicago IL 60657

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1649.81

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007196

Amount of Each Receipt this Period
 82.99

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

Mailing Address 1541 West Wolfram Street

City State Zip Code
 Chicago IL 60657

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1732.80

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115735

Amount of Each Receipt this Period
 82.99

Full Name (Last, First, Middle Initial)
C. SHARON P EDWARDS

Mailing Address 469 E. HOME AVENUE

City State Zip Code
 PALATINE IL 60074

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

Name of Employer Occupation
 Allstate Insurance Company Sr. Manager Accounting/Fi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 217.01

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007014

Amount of Each Receipt this Period
 10.90

SUBTOTAL of Receipts This Page (optional)..... ▶ 176.88

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 220
	<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. SHARON P EDWARDS
Full Name (Last, First, Middle Initial)

Mailing Address 469 E. HOME AVENUE

City PALATINE State IL Zip Code 60074

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

Name of Employer Allstate Insurance Company Occupation Sr. Manager Accounting/Fi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 227.91

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115556

Amount of Each Receipt this Period
10.90

B. ROBERT N EMMICH
Full Name (Last, First, Middle Initial)

Mailing Address 108 SADDLE CREEK COVE

City CANTON State MS Zip Code 39046

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

Name of Employer Allstate Insurance Company Occupation Territorial Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 369.93

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007171

Amount of Each Receipt this Period
18.58

C. ROBERT N EMMICH
Full Name (Last, First, Middle Initial)

Mailing Address 108 SADDLE CREEK COVE

City CANTON State MS Zip Code 39046

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

Name of Employer Allstate Insurance Company Occupation Territorial Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 388.51

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115710

Amount of Each Receipt this Period
18.58

SUBTOTAL of Receipts This Page (optional)..... ▶ 48.06

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

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

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

FOR LINE NUMBER: PAGE 55 OF 220
(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. KATHLEEN N ENRIGHT
 Mailing Address 10323 TRUMBULL AVE
 City State Zip Code
 CHICAGO IL 60655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-FSS-Accounting
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 896.70

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007078
 Amount of Each Receipt this Period
 52.97

Full Name (Last, First, Middle Initial)
B. KATHLEEN N ENRIGHT
 Mailing Address 10323 TRUMBULL AVE
 City State Zip Code
 CHICAGO IL 60655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-FSS-Accounting
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 949.67

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115618
 Amount of Each Receipt this Period
 52.97

Full Name (Last, First, Middle Initial)
C. MICHAEL L ESCOBAR
 Mailing Address 660 BALMORAL LANE
 City State Zip Code
 INVERNESS IL 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-HR-Diversity & Org. Ef
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1148.04

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006899
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 163.63
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 56 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address **660 BALMORAL LANE**

City **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 ▼ **1205.73**

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115441

Amount of Each Receipt this Period
57.69

Full Name (Last, First, Middle Initial)
B. CAROLYN A FILIPOVIC

Mailing Address **918 JUNIPER ROAD**

City **GLENVIEW** State **IL** Zip Code **60025**

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

Name of Employer **Allstate Insurance Company** Occupation **Ethics Director**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **623.46**

Date of Receipt
10 / 04 / 2013
Transaction ID : A2013-4007103

Amount of Each Receipt this Period
31.38

Full Name (Last, First, Middle Initial)
C. CAROLYN A FILIPOVIC

Mailing Address **918 JUNIPER ROAD**

City **GLENVIEW** State **IL** Zip Code **60025**

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

Name of Employer **Allstate Insurance Company** Occupation **Ethics Director**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **654.84**

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115643

Amount of Each Receipt this Period
31.38

SUBTOTAL of Receipts This Page (optional)..... ► **120.45**

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

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

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

FOR LINE NUMBER: PAGE 57 OF 220
(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. STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

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

Name of Employer Occupation
Allstate Insurance Company Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006926

Amount of Each Receipt this Period
27.90

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

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

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

Name of Employer Occupation
Allstate Insurance Company Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
583.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115468

Amount of Each Receipt this Period
27.90

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

Mailing Address 1007 Harris Road

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company VP-AF-Chief of Staff & St

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
784.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007112

Amount of Each Receipt this Period
39.59

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.39

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

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

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

FOR LINE NUMBER: PAGE 58 OF 220
(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. LISA J FLANARY

Mailing Address 1007 Harris Road

City State Zip Code
 GRAYSLAKE IL 60030

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

Name of Employer Occupation
 Allstate Insurance Company VP-AF-Chief of Staff & St

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 824.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115651

Amount of Each Receipt this Period
 39.59

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

Mailing Address 613 REX

City State Zip Code
 ELMHURST IL 60126

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

Name of Employer Occupation
 Allstate Insurance Company VP-Affinity Solutions Chi

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 993.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007016

Amount of Each Receipt this Period
 50.19

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

Mailing Address 613 REX

City State Zip Code
 ELMHURST IL 60126

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

Name of Employer Occupation
 Allstate Insurance Company VP-Affinity Solutions Chi

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1043.91

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115558

Amount of Each Receipt this Period
 50.19

SUBTOTAL of Receipts This Page (optional)..... ▶ 139.97

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

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

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

FOR LINE NUMBER: PAGE 59 OF 220
(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. ANGELA K FONTANA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1280 WILD ROSE LANE
 City State Zip Code
 LAKE FOREST IL 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-LGL-Allstate Financial
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1052.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007140
 Amount of Each Receipt this Period
 52.83

B. ANGELA K FONTANA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1280 WILD ROSE LANE
 City State Zip Code
 LAKE FOREST IL 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-LGL-Allstate Financial
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1105.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115679
 Amount of Each Receipt this Period
 52.83

C. SARA A FOSTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2216 BARRETT DR
 City State Zip Code
 ALGONQUIN IL 60102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company ATO-Six Sigma-Expert
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 663.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007032
 Amount of Each Receipt this Period
 33.53

SUBTOTAL of Receipts This Page (optional)..... ▶ 139.19
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 220
	<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. SARA A FOSTER
Full Name (Last, First, Middle Initial)

Mailing Address 2216 BARRETT DR

City ALGONQUIN State IL Zip Code 60102

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

Name of Employer Allstate Insurance Company Occupation ATO-Six Sigma-Expert

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **696.93**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115573

Amount of Each Receipt this Period
33.53

B. ANNE M FRANCESCONI
Full Name (Last, First, Middle Initial)

Mailing Address 390 17th St. NW #5034

City Atlanta State GA Zip Code 30363

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

Name of Employer Allstate Insurance Company Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **313.05**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007023

Amount of Each Receipt this Period
15.74

C. ANNE M FRANCESCONI
Full Name (Last, First, Middle Initial)

Mailing Address 390 17th St. NW #5034

City Atlanta State GA Zip Code 30363

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

Name of Employer Allstate Insurance Company Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **328.79**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115564

Amount of Each Receipt this Period
15.74

SUBTOTAL of Receipts This Page (optional)..... **65.01**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 220
	<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. KARL A FRIEDMAN
Full Name (Last, First, Middle Initial)

Mailing Address 333 DUNLEER DRIVE

City CARY State IL Zip Code 60013

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

Name of Employer Allstate Insurance Company Occupation ATO-Six Sigma-Expert

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **237.66**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007029

Amount of Each Receipt this Period
11.91

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

Mailing Address 333 DUNLEER DRIVE

City CARY State IL Zip Code 60013

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

Name of Employer Allstate Insurance Company Occupation ATO-Six Sigma-Expert

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.57**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115570

Amount of Each Receipt this Period
11.91

C. ANGELA M Fusco
Full Name (Last, First, Middle Initial)

Mailing Address 29 Tullach Place

City Stonebrae State CA Zip Code 94542

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **813.87**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006935

Amount of Each Receipt this Period
41.22

SUBTOTAL of Receipts This Page (optional)..... ▶ **65.04**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. ANGELA M Fusco

Mailing Address 29 Tullach Place

City State Zip Code
Stonebrae CA 94542

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

Name of Employer Occupation
Allstate Insurance Company Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
855.09

Date of Receipt
10 / 18 / 2013

Transaction ID : A2013-4115477

Amount of Each Receipt this Period
41.22

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

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.35

Date of Receipt
10 / 04 / 2013

Transaction ID : A2013-4006895

Amount of Each Receipt this Period
27.95

Full Name (Last, First, Middle Initial)
C. VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
583.30

Date of Receipt
10 / 18 / 2013

Transaction ID : A2013-4115438

Amount of Each Receipt this Period
27.95

SUBTOTAL of Receipts This Page (optional)..... **97.12**

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

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

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

FOR LINE NUMBER: PAGE 63 OF 220
(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. ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code
 CRYSTAL LAKE IL 60014

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 346.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006988

Amount of Each Receipt this Period
 17.32

Full Name (Last, First, Middle Initial)
B. ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code
 CRYSTAL LAKE IL 60014

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 363.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115530

Amount of Each Receipt this Period
 17.32

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

Mailing Address 4506 DEER TRAIL

City State Zip Code
 NORTHBROOK IL 60062

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

Name of Employer Occupation
 Allstate Insurance Company Privacy Sr. Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 263.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006931

Amount of Each Receipt this Period
 13.27

SUBTOTAL of Receipts This Page (optional)..... ▶ 47.91

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 64 OF 220
(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 C GARDNER
 Mailing Address 4506 DEER TRAIL
 City NORTHBROOK State IL Zip Code 60062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Privacy Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **276.87**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115473
 Amount of Each Receipt this Period
13.27

Full Name (Last, First, Middle Initial)
B. NICK GEORGAKOPOULOS
 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 Finance Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **775.11**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007037
 Amount of Each Receipt this Period
39.01

Full Name (Last, First, Middle Initial)
C. NICK GEORGAKOPOULOS
 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 Finance Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **814.12**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115578
 Amount of Each Receipt this Period
39.01

SUBTOTAL of Receipts This Page (optional)..... ▶ **91.29**
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 OF 220
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. MARIBEL V GERSTNER
Full Name (Last, First, Middle Initial)
Mailing Address 2754 CHARLIE CT.
City GLENVIEW State IL Zip Code 60026
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-AF-Pres & Chief Operat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 979.77

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007002
Amount of Each Receipt this Period
49.72

B. MARIBEL V GERSTNER
Full Name (Last, First, Middle Initial)
Mailing Address 2754 CHARLIE CT.
City GLENVIEW State IL Zip Code 60026
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-AF-Pres & Chief Operat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1029.49

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115544
Amount of Each Receipt this Period
49.72

C. BONNIE S GILL
Full Name (Last, First, Middle Initial)
Mailing Address 1570 EDGEFIELD LANE
City HOFFMAN ESTATES State IL Zip Code 60169
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-PRD-Product Vice Presi
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 660.36

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007142
Amount of Each Receipt this Period
33.20

SUBTOTAL of Receipts This Page (optional).....▶	132.64
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 220
	<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. BONNIE S GILL

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-PRD-Product Vice Presi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **693.56**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2013

Transaction ID : A2013-4115681

Amount of Each Receipt this Period

33.20

Full Name (Last, First, Middle Initial)
B. 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	Director Litigation Servi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **896.27**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		04		2013

Transaction ID : A2013-4006900

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)
C. 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	Director Litigation Servi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **941.27**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2013

Transaction ID : A2013-4115442

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional).....▶	123.20
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 67 OF 220
(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. WILLIAM T GOFF

Mailing Address 310 Plantation Way

City Roswell State GA Zip Code 30075

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **446.09**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4006901

Amount of Each Receipt this Period
22.57

Full Name (Last, First, Middle Initial)
B. WILLIAM T GOFF

Mailing Address 310 Plantation Way

City Roswell State GA Zip Code 30075

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **468.66**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115443

Amount of Each Receipt this Period
22.57

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

Mailing Address 10 MULBERRY LN

City HAWTHORN WOODS State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **438.57**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4006997

Amount of Each Receipt this Period
22.05

SUBTOTAL of Receipts This Page (optional)..... ▶ **67.19**

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

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

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

FOR LINE NUMBER: PAGE 68 OF 220
(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. BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-411539

Amount of Each Receipt this Period
 22.05

Full Name (Last, First, Middle Initial)
B. 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 Senior Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
714.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007168

Amount of Each Receipt this Period
 35.86

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 Senior Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
749.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115707

Amount of Each Receipt this Period
 35.86

SUBTOTAL of Receipts This Page (optional)..... ▶ 93.77

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

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

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

FOR LINE NUMBER: PAGE 69 OF 220
(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. 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 VP-LGL-Staff & Retained C
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 814.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006965
 Amount of Each Receipt this Period
 51.24

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 VP-LGL-Staff & Retained C
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 865.59

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115507
 Amount of Each Receipt this Period
 51.24

C. KELLIE H GREEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 Meadowlark Circle
 City State Zip Code
 Lindenhurst IL 60046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Marketing Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006950
 Amount of Each Receipt this Period
 17.35

SUBTOTAL of Receipts This Page (optional)..... ▶ 119.83
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 220
	<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. KELLIE H GREEN
Full Name (Last, First, Middle Initial)

Mailing Address 150 Meadowlark Circle

City Lindenhurst State IL Zip Code 60046

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.30**

Date of Receipt
10 / 18 / 2013

Transaction ID : A2013-4115492

Amount of Each Receipt this Period
17.35

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

Mailing Address 1711 Wildwood Ct

City Glenview State IL Zip Code 60025

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1168.35**

Date of Receipt
10 / 04 / 2013

Transaction ID : A2013-4007187

Amount of Each Receipt this Period
59.05

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

Mailing Address 1711 Wildwood Ct

City Glenview State IL Zip Code 60025

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1227.40**

Date of Receipt
10 / 18 / 2013

Transaction ID : A2013-4115726

Amount of Each Receipt this Period
59.05

SUBTOTAL of Receipts This Page (optional)..... ▶ **135.45**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 220
	<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. JUDITH P GREFFIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 338 North Kenilworth
 City OAK PARK State IL Zip Code 60302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-INV-Chief Investment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1461.39

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006974
 Amount of Each Receipt this Period
 73.85

B. JUDITH P GREFFIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 338 North Kenilworth
 City OAK PARK State IL Zip Code 60302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-INV-Chief Investment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1535.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115516
 Amount of Each Receipt this Period
 73.85

C. M'BA G GREGOIRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Linden Road
 City Lake Zurich State IL Zip Code 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Director Litigation Servi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 366.74

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007170
 Amount of Each Receipt this Period
 18.82

SUBTOTAL of Receipts This Page (optional).....▶	166.52
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 72 OF 220
(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 Director Litigation Servi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 385.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115709

Amount of Each Receipt this Period
 18.82

Full Name (Last, First, Middle Initial)
B. MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City State Zip Code
 WESTBURY NY 11590

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

Name of Employer Occupation
 Allstate Insurance Company Sales Support Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 365.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006911

Amount of Each Receipt this Period
 18.42

Full Name (Last, First, Middle Initial)
C. MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City State Zip Code
 WESTBURY NY 11590

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

Name of Employer Occupation
 Allstate Insurance Company Sales Support Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 384.39

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115453

Amount of Each Receipt this Period
 18.42

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.66

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 220
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Gerard T GROUZARD		Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2013 Transaction ID : A2013-4006995
Mailing Address 943 W CAROLYN DR		Amount of Each Receipt this Period 16.59
City PALATINE	State IL	Zip Code 60067
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation ATO-Leader-Sr Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.13	

Full Name (Last, First, Middle Initial) B. Gerard T GROUZARD		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2013 Transaction ID : A2013-4115537
Mailing Address 943 W CAROLYN DR		Amount of Each Receipt this Period 16.59
City PALATINE	State IL	Zip Code 60067
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation ATO-Leader-Sr Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.72	

Full Name (Last, First, Middle Initial) C. GREGORY J GUIDOS		Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2013 Transaction ID : A2013-4007102
Mailing Address 6130 St. Andrews Ct.		Amount of Each Receipt this Period 32.40
City Ponte Vedra Beach	State FL	Zip Code 32082
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation SVP-AF-President Allstate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 642.10	

SUBTOTAL of Receipts This Page (optional).....▶	65.58
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 74 OF 220
(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. 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-AF-President Allstate

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **674.50**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115642

Amount of Each Receipt this Period
32.40

Full Name (Last, First, Middle Initial)
B. DANIEL L GUTHRIE

Mailing Address 33 Savanna Cr

City State Zip Code
 Mt. Sinai NY 11766

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

Name of Employer Occupation
 Allstate Insurance Company Field Product Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.91**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007124

Amount of Each Receipt this Period
15.21

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

Mailing Address 33 Savanna Cr

City State Zip Code
 Mt. Sinai NY 11766

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

Name of Employer Occupation
 Allstate Insurance Company Field Product Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **317.12**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115663

Amount of Each Receipt this Period
15.21

SUBTOTAL of Receipts This Page (optional)..... ▶ **62.82**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES W HAIDU		Date of Receipt
Mailing Address 3 South Wynstone		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code N. BARRINGTON IL 60010		Transaction ID : A2013-4007058
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.68"/>
Name of Employer Allstate Insurance Company	Occupation SVP-PRD-Chief Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="213.15"/>	

Full Name (Last, First, Middle Initial) B. JAMES W HAIDU		Date of Receipt
Mailing Address 3 South Wynstone		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code N. BARRINGTON IL 60010		Transaction ID : A2013-4115598
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.68"/>
Name of Employer Allstate Insurance Company	Occupation SVP-PRD-Chief Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="223.83"/>	

Full Name (Last, First, Middle Initial) C. ROBERT R HALPERN-GIVENS		Date of Receipt
Mailing Address 3001 SUTTON WOODS CT		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code CRYSTAL LAKE IL 60012		Transaction ID : A2013-4007077
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="18.02"/>
Name of Employer Allstate Insurance Company	Occupation HR-Payroll & Relocation-S	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="359.59"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="39.38"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 76 OF 220
(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. ROBERT R HALPERN-GIVENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3001 SUTTON WOODS CT
 City State Zip Code
 CRYSTAL LAKE IL 60012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company HR-Payroll & Relocation-S
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 377.61

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115617
 Amount of Each Receipt this Period
 18.02

B. RANDALL M HANSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 840 ALLEGHANY
 City State Zip Code
 GRAYSLAKE IL 60030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Claim Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 805.89

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007148
 Amount of Each Receipt this Period
 40.56

C. RANDALL M HANSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 840 ALLEGHANY
 City State Zip Code
 GRAYSLAKE IL 60030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Claim Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 846.45

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115687
 Amount of Each Receipt this Period
 40.56

SUBTOTAL of Receipts This Page (optional)..... ▶ 99.14
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 77 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. David 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 ▼ 1299.04

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007189
 Amount of Each Receipt this Period
 65.24

B. 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 ▼ 1364.28

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115728
 Amount of Each Receipt this Period
 65.24

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-SPS-Sourcing & Procur
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007204
 Amount of Each Receipt this Period
 63.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 193.48
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 78 OF 220
(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. Cheryl A Harris
 Mailing Address 4136 Three Lakes Drive
 City State Zip Code
 Long Grove IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-SPS-Sourcing & Procur
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 567.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115743
 Amount of Each Receipt this Period
 63.00

Full Name (Last, First, Middle Initial)
B. Jacqueline J Hart
 Mailing Address 1431 W. Walton
 City State Zip Code
 Chicago IL 60622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Field Administration Dire
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 343.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007183
 Amount of Each Receipt this Period
 17.31

Full Name (Last, First, Middle Initial)
C. Jacqueline J Hart
 Mailing Address 1431 W. Walton
 City State Zip Code
 Chicago IL 60622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Field Administration Dire
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.67

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115722
 Amount of Each Receipt this Period
 17.31

SUBTOTAL of Receipts This Page (optional)..... ▶ 97.62
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 79 OF 220
(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. KEITH A HAUSCHILDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 Little Bay Harbor Drive
 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-AF-Ops & Technology AI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 559.53

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006971
 Amount of Each Receipt this Period
 28.85

B. KEITH A HAUSCHILDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 Little Bay Harbor Drive
 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-AF-Ops & Technology AI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 588.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115513
 Amount of Each Receipt this Period
 28.85

C. JEFFREY R HEALY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7452 BERKELEY CIRCLE
 City State Zip Code
 CASTLE ROCK CO 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Regional Financial Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006918
 Amount of Each Receipt this Period
 17.13

SUBTOTAL of Receipts This Page (optional)..... ▶ 74.83
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 80 OF 220
(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. JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City State Zip Code
CASTLE ROCK CO 80108

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

Name of Employer Occupation
Allstate Insurance Company Regional Financial Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115460

Amount of Each Receipt this Period
17.13

Full Name (Last, First, Middle Initial)
B. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City State Zip Code
BUFFALO GROVE IL 60089

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

Name of Employer Occupation
Allstate Insurance Company Audit Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.91

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006890

Amount of Each Receipt this Period
16.73

Full Name (Last, First, Middle Initial)
C. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City State Zip Code
BUFFALO GROVE IL 60089

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

Name of Employer Occupation
Allstate Insurance Company Audit Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115433

Amount of Each Receipt this Period
16.73

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.59

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 220
	<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. EYVONNA HEMPHILL
Full Name (Last, First, Middle Initial)
Mailing Address 337 46TH AVE

City BELLWOOD	State IL	Zip Code 60104
------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Qty Comp & Edu Sr. Mgr
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.13**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007005

Amount of Each Receipt this Period

71.11

B. EYVONNA HEMPHILL
Full Name (Last, First, Middle Initial)
Mailing Address 337 46TH AVE

City BELLWOOD	State IL	Zip Code 60104
------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Qty Comp & Edu Sr. Mgr
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **357.24**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115547

Amount of Each Receipt this Period

17.11

C. Barbara A Higgins
Full Name (Last, First, Middle Initial)
Mailing Address 2107 N Lakewood Ave

City Chicago	State IL	Zip Code 60614
-----------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-PC-Customer Retention
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **732.69**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007205

Amount of Each Receipt this Period

36.92

SUBTOTAL of Receipts This Page (optional).....	71.14
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: (check only one)	PAGE 82 OF 220
	<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. Barbara A Higgins
 Full Name (Last, First, Middle Initial)
 Mailing Address 2107 N Lakewood Ave
 City Chicago State IL Zip Code 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-PC-Customer Retention
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 769.61

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115744
 Amount of Each Receipt this Period
 36.92

B. EDDIE H HILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 8390 Burnt Chimney Road
 City Wirtz State VA Zip Code 24184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Leader-Sr Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006946
 Amount of Each Receipt this Period
 16.87

C. EDDIE H HILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 8390 Burnt Chimney Road
 City Wirtz State VA Zip Code 24184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Leader-Sr Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115488
 Amount of Each Receipt this Period
 16.87

SUBTOTAL of Receipts This Page (optional).....▶	70.66
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 83 OF 220
(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. WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
 LINDENHURST IL 60046

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

Name of Employer Occupation
 Allstate Insurance Company EVP-PRD-Regional Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2522.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006951

Amount of Each Receipt this Period
 133.38

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

Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
 LINDENHURST IL 60046

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

Name of Employer Occupation
 Allstate Insurance Company EVP-PRD-Regional Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2655.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115493

Amount of Each Receipt this Period
 133.38

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

Mailing Address 2510 OAK AVENUE

City State Zip Code
 NORTHBROOK IL 60062

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

Name of Employer Occupation
 Allstate Insurance Company Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 305.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007041

Amount of Each Receipt this Period
 15.28

SUBTOTAL of Receipts This Page (optional)..... ▶ 282.04

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 220
	<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. SHERYL L HODGES
Full Name (Last, First, Middle Initial)

Mailing Address 2510 OAK AVENUE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115582

Amount of Each Receipt this Period
 15.28

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

Mailing Address 464 Washington Road

City Lake Forest State IL Zip Code 60045

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

Name of Employer Allstate Insurance Company Occupation SVP-ATO-Prog Mgmt Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 922.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007177

Amount of Each Receipt this Period
 46.14

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

Mailing Address 464 Washington Road

City Lake Forest State IL Zip Code 60045

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

Name of Employer Allstate Insurance Company Occupation SVP-ATO-Prog Mgmt Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 968.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115716

Amount of Each Receipt this Period
 46.14

SUBTOTAL of Receipts This Page (optional).....▶	107.56
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 85 OF 220
(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 L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60004

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

Name of Employer Occupation
 Allstate Insurance Company HR-Communications-Directo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 412.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007121

Amount of Each Receipt this Period
 20.69

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

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60004

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

Name of Employer Occupation
 Allstate Insurance Company HR-Communications-Directo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 433.59

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115660

Amount of Each Receipt this Period
 20.69

Full Name (Last, First, Middle Initial)
C. MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City State Zip Code
 JACKSONVILLE FL 32259

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

Name of Employer Occupation
 Allstate Insurance Company Field Administration Dire

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 430.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006939

Amount of Each Receipt this Period
 21.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 63.13

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

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

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

FOR LINE NUMBER: PAGE 86 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City State Zip Code
 JACKSONVILLE FL 32259

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

Name of Employer Occupation
 Allstate Insurance Company Field Administration Dire

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 452.07

Date of Receipt
 10 / 18 / 2013
Transaction ID : A2013-4115481

Amount of Each Receipt this Period
 21.75

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

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
 KILDEER IL 60047

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

Name of Employer Occupation
 Allstate Insurance Company VP-LGL-Corporate Law

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1116.71

Date of Receipt
 10 / 04 / 2013
Transaction ID : A2013-4007038

Amount of Each Receipt this Period
 56.38

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

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
 KILDEER IL 60047

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

Name of Employer Occupation
 Allstate Insurance Company VP-LGL-Corporate Law

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1173.09

Date of Receipt
 10 / 18 / 2013
Transaction ID : A2013-4115579

Amount of Each Receipt this Period
 56.38

SUBTOTAL of Receipts This Page (optional)..... ▶ 134.51

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

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

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

FOR LINE NUMBER: PAGE 87 OF 220
(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. MARIANO A IMBARRATO
 Full Name (Last, First, Middle Initial)
 Mailing Address 10825 CHUCER 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 Vice PresidentCapital PI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 314.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007022
 Amount of Each Receipt this Period
 15.81

B. MARIANO A IMBARRATO
 Full Name (Last, First, Middle Initial)
 Mailing Address 10825 CHUCER 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 Vice PresidentCapital PI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115563
 Amount of Each Receipt this Period
 15.81

C. LYNNE A IVERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 890 BLAZING STAR TRAIL
 City State Zip Code
 CARY IL 60013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Product Operations Senior
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 639.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007010
 Amount of Each Receipt this Period
 31.98

SUBTOTAL of Receipts This Page (optional)..... ▶ 63.60
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 88 OF 220
(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. LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code
 CARY IL 60013

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

Name of Employer Occupation
 Allstate Insurance Company Product Operations Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 671.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115552

Amount of Each Receipt this Period
 31.98

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

Mailing Address 226 Maison Court

City State Zip Code
 Altamonte Springs FL 32714

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

Name of Employer Occupation
 Allstate Insurance Company Regional Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 460.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007153

Amount of Each Receipt this Period
 23.15

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

Mailing Address 226 Maison Court

City State Zip Code
 Altamonte Springs FL 32714

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

Name of Employer Occupation
 Allstate Insurance Company Regional Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 484.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115692

Amount of Each Receipt this Period
 23.15

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.28

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

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

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

FOR LINE NUMBER: PAGE 89 OF 220
(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. CRAIG A JAMES

Mailing Address 235 HEATHER AVE

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company ATO-Six Sigma-Expert

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.74

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007095

Amount of Each Receipt this Period
13.92

Full Name (Last, First, Middle Initial)
B. CRAIG A JAMES

Mailing Address 235 HEATHER AVE

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company ATO-Six Sigma-Expert

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115635

Amount of Each Receipt this Period
13.92

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

Mailing Address 24160 North Beach Dr

City State Zip Code
Cary IL 60013

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

Name of Employer Occupation
Allstate Insurance Company SPS-Strategic Alliance-Di

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
794.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006993

Amount of Each Receipt this Period
39.92

SUBTOTAL of Receipts This Page (optional)..... ▶ 67.76

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 OF 220
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 24160 North Beach Dr

City	State	Zip Code
Cary	IL	60013

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

Name of Employer	Occupation
Allstate Insurance Company	SPS-Strategic Alliance-Di

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **834.81**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2013

Transaction ID : A2013-4115535

Amount of Each Receipt this Period

				39.92

B. JAMES W JONSKE
Full Name (Last, First, Middle Initial)

Mailing Address 1217 BARCLAY CIRCLE

City	State	Zip Code
BARRINGTON	IL	60010

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

Name of Employer	Occupation
Allstate Insurance Company	VP-PRD-Standard Auto

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **354.29**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		04		2013

Transaction ID : A2013-4007107

Amount of Each Receipt this Period

				17.87

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

Mailing Address 1217 BARCLAY CIRCLE

City	State	Zip Code
BARRINGTON	IL	60010

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

Name of Employer	Occupation
Allstate Insurance Company	VP-PRD-Standard Auto

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **372.16**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2013

Transaction ID : A2013-4115647

Amount of Each Receipt this Period

				17.87

SUBTOTAL of Receipts This Page (optional).....▶	75.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 2634 North Wayne

City Chicago State IL Zip Code 60614

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1428.31**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007197

Amount of Each Receipt this Period
71.85

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

Mailing Address 2634 North Wayne

City Chicago State IL Zip Code 60614

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.16**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115736

Amount of Each Receipt this Period
71.85

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

Mailing Address 2180 Trailblazer Way

City Castle Rock State CO Zip Code 80109

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **482.83**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4006904

Amount of Each Receipt this Period
24.29

SUBTOTAL of Receipts This Page (optional)..... **167.99**

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

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

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

FOR LINE NUMBER: PAGE 92 OF 220
(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 KANE

Mailing Address 2180 Trailblazer Way

City State Zip Code
 Castle Rock CO 80109

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **507.12**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115446

Amount of Each Receipt this Period
24.29

Full Name (Last, First, Middle Initial)
B. TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City State Zip Code
 GRAYSLAKE IL 60030

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **356.60**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007114

Amount of Each Receipt this Period
17.94

Full Name (Last, First, Middle Initial)
C. TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City State Zip Code
 GRAYSLAKE IL 60030

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **374.54**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115653

Amount of Each Receipt this Period
17.94

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.17**

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

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

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

FOR LINE NUMBER: PAGE 93 OF 220
(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. Wilford J Kavanaugh

Mailing Address 7 Open Parkway North

City State Zip Code
 Hawthorn Woods IL 60047

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

Name of Employer Occupation
 Allstate Insurance Company SVP-AF-Pres. Allstate Fin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1117.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007200

Amount of Each Receipt this Period
 55.85

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

Mailing Address 7 Open Parkway North

City State Zip Code
 Hawthorn Woods IL 60047

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

Name of Employer Occupation
 Allstate Insurance Company SVP-AF-Pres. Allstate Fin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1172.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115739

Amount of Each Receipt this Period
 55.85

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

Mailing Address 1904 W. Schoot

City State Zip Code
 Chicago IL 60657

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

Name of Employer Occupation
 Allstate Insurance Company Corp Rel Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 205.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007206

Amount of Each Receipt this Period
 6.98

SUBTOTAL of Receipts This Page (optional)..... ▶ 118.68

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. Robert A Kellman

Mailing Address 1904 W. Schoot

City Chicago State IL Zip Code 60657

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

Name of Employer Allstate Insurance Company Occupation Corp Rel Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **212.75**

Date of Receipt **10 / 18 / 2013**

Transaction ID : A2013-4115745

Amount of Each Receipt this Period **6.98**

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

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-SOG-Protection Progra

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1122.63**

Date of Receipt **10 / 04 / 2013**

Transaction ID : A2013-4006888

Amount of Each Receipt this Period **56.46**

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

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-SOG-Protection Progra

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1179.09**

Date of Receipt **10 / 18 / 2013**

Transaction ID : A2013-4115431

Amount of Each Receipt this Period **56.46**

SUBTOTAL of Receipts This Page (optional)..... **119.90**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 220
	<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. CURTIS L KIBLER
Full Name (Last, First, Middle Initial)

Mailing Address 1332 BAY MEADOWS DR

City BARTLETT State IL Zip Code 60103

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **871.46**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006994

Amount of Each Receipt this Period
43.67

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

Mailing Address 1332 BAY MEADOWS DR

City BARTLETT State IL Zip Code 60103

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **915.13**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115536

Amount of Each Receipt this Period
43.67

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

Mailing Address 200 OXFORD RD

City Tower Lakes State IL Zip Code 60010

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

Name of Employer Allstate Insurance Company Occupation VP-LGL-Investment Law

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **542.11**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007026

Amount of Each Receipt this Period
27.27

SUBTOTAL of Receipts This Page (optional)..... ▶ **114.61**

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

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

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

FOR LINE NUMBER: PAGE 96 OF 220
(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. PAUL N KIERIG
 Mailing Address 200 OXFORD RD
 City State Zip Code
 Tower Lakes IL 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-LGL-Investment Law
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 569.38

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115567
 Amount of Each Receipt this Period
 27.27

Full Name (Last, First, Middle Initial)
B. BARBARA L KILROY
 Mailing Address 1036 VINEYARD DRIVE
 City State Zip Code
 GURNEE IL 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Finance Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 416.41

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006944
 Amount of Each Receipt this Period
 20.89

Full Name (Last, First, Middle Initial)
C. BARBARA L KILROY
 Mailing Address 1036 VINEYARD DRIVE
 City State Zip Code
 GURNEE IL 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Finance Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 437.30

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115486
 Amount of Each Receipt this Period
 20.89

SUBTOTAL of Receipts This Page (optional)..... ▶ 69.05
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 97 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. ANNE I KIM

Mailing Address 1580 SHERMAN AVE # 201

City State Zip Code
 EVANSTON IL 60201

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 421.21

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007091

Amount of Each Receipt this Period
 21.20

Full Name (Last, First, Middle Initial)
B. ANNE I KIM

Mailing Address 1580 SHERMAN AVE # 201

City State Zip Code
 EVANSTON IL 60201

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 442.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115631

Amount of Each Receipt this Period
 21.20

Full Name (Last, First, Middle Initial)
c. Stephen B King

Mailing Address 1620 Monterey

City State Zip Code
 Glenview IL 60026

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

Name of Employer Occupation
 Allstate Insurance Company VP-HR-Leadership & Talent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 242.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007185

Amount of Each Receipt this Period
 30.35

SUBTOTAL of Receipts This Page (optional)..... ▶ 72.75

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. Stephen B King

Mailing Address 1620 Monterey

City State Zip Code
Glenview IL 60026

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

Name of Employer Occupation
Allstate Insurance Company VP-HR-Leadership & Talent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.15

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115724

Amount of Each Receipt this Period
30.35

Full Name (Last, First, Middle Initial)
B. Brian D Klemstein

Mailing Address 608 Haddon Circle

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Occupation
Allstate Insurance Company Unclassified Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
311.18

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007182

Amount of Each Receipt this Period
15.66

Full Name (Last, First, Middle Initial)
C. Brian D Klemstein

Mailing Address 608 Haddon Circle

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Occupation
Allstate Insurance Company Unclassified Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
326.84

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115721

Amount of Each Receipt this Period
15.66

SUBTOTAL of Receipts This Page (optional)..... **61.67**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 220
	<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 T KLODZINSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 18699 W. State Line Road
 City Antioch State IL Zip Code 60002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Finance Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007052
 Amount of Each Receipt this Period
 13.55

B. STEVEN T KLODZINSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 18699 W. State Line Road
 City Antioch State IL Zip Code 60002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Finance Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115593
 Amount of Each Receipt this Period
 13.55

C. TIMOTHY L KNAPP
 Full Name (Last, First, Middle Initial)
 Mailing Address 132 FARMSTEAD CIRCLE
 City LEBANON State PA Zip Code 17042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006932
 Amount of Each Receipt this Period
 22.25

SUBTOTAL of Receipts This Page (optional).....▶	49.35
TOTAL This Period (last page this line number only).....▶	

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

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(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. DANIEL P KRAFT

Mailing Address 1884 S. WARBLER CT.

City State Zip Code
 LIBERTYVILLE IL 60048

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

Name of Employer Occupation
 Allstate Insurance Company MICR-PSID Vehicle-Directo

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **347.85**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4006968

Amount of Each Receipt this Period
12.46

Full Name (Last, First, Middle Initial)
B. DANIEL P KRAFT

Mailing Address 1884 S. WARBLER CT.

City State Zip Code
 LIBERTYVILLE IL 60048

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

Name of Employer Occupation
 Allstate Insurance Company MICR-PSID Vehicle-Directo

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.31**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115510

Amount of Each Receipt this Period
12.46

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

Mailing Address 4513 Jenna Rd

City State Zip Code
 Glenview IL 60025

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.64**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007081

Amount of Each Receipt this Period
35.46

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.38**

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

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

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FOR LINE NUMBER: PAGE 102 OF 220
(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. JAIKRISHNA KUCHIMANCHI
 Full Name (Last, First, Middle Initial)
 Mailing Address 4513 Jenna Rd
 City State Zip Code
 Glenview IL 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company AFT-Manager-Sr Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 736.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115621
 Amount of Each Receipt this Period
 35.46

B. J. Wayne W KULLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2005 Henley St.
 City State Zip Code
 GLENVIEW IL 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-SOG-Agency Sales Cross
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 476.05

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006961
 Amount of Each Receipt this Period
 23.96

C. J. Wayne W KULLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2005 Henley St.
 City State Zip Code
 GLENVIEW IL 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-SOG-Agency Sales Cross
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.01

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115503
 Amount of Each Receipt this Period
 23.96

SUBTOTAL of Receipts This Page (optional)..... ▶ 83.38
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 103 OF 220
(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. PAUL D LANSPA

Mailing Address 3819 PARSONS ROAD

City State Zip Code
 CARPENTERSVILLE IL 60110

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

Name of Employer Occupation
 Allstate Insurance Company Senior Division Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 309.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007149

Amount of Each Receipt this Period
 28.12

Full Name (Last, First, Middle Initial)
B. PAUL D LANSPA

Mailing Address 3819 PARSONS ROAD

City State Zip Code
 CARPENTERSVILLE IL 60110

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

Name of Employer Occupation
 Allstate Insurance Company Senior Division Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 337.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115688

Amount of Each Receipt this Period
 28.12

Full Name (Last, First, Middle Initial)
C. JEFFREY F LEASENDALE

Mailing Address 422 RIDGECREST RD NE

City State Zip Code
 ATLANTA GA 30307

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

Name of Employer Occupation
 Allstate Insurance Company Lead Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006923

Amount of Each Receipt this Period
 15.08

SUBTOTAL of Receipts This Page (optional)..... ▶ 71.32

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 220
	<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. JEFFREY F LEASENDALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 422 RIDGECREST RD NE
 City ATLANTA State GA Zip Code 30307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Lead Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115465
 Amount of Each Receipt this Period
 15.08

B. SUSAN L LEES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1705 DARTMOUTH LN
 City DEERFIELD State IL Zip Code 60015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-LGL-Gen'l Counsel & C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1268.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006887
 Amount of Each Receipt this Period
 102.00

C. SUSAN L LEES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1705 DARTMOUTH LN
 City DEERFIELD State IL Zip Code 60015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation EVP-LGL-Gen'l Counsel & C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1370.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115430
 Amount of Each Receipt this Period
 102.00

SUBTOTAL of Receipts This Page (optional).....▶	219.08
TOTAL This Period (last page this line number only).....▶	

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

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FOR LINE NUMBER: PAGE 105 OF 220
(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. NANCY K LEMKE

Mailing Address 5697 BROOKSTONE WALK

City State Zip Code
ACWORTH GA 30101

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

Name of Employer Occupation
Allstate Insurance Company Corp Rel Regional Sr Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.71

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007048

Amount of Each Receipt this Period
23.51

Full Name (Last, First, Middle Initial)
B. NANCY K LEMKE

Mailing Address 5697 BROOKSTONE WALK

City State Zip Code
ACWORTH GA 30101

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

Name of Employer Occupation
Allstate Insurance Company Corp Rel Regional Sr Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
492.22

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115589

Amount of Each Receipt this Period
23.51

Full Name (Last, First, Middle Initial)
C. GARY L LEVINE

Mailing Address 16340 W. Arlington Drive

City State Zip Code
Libertyville IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Senior Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
386.82

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007131

Amount of Each Receipt this Period
19.51

SUBTOTAL of Receipts This Page (optional)..... ▶ 66.53

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

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

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

FOR LINE NUMBER: PAGE 106 OF 220
(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. GARY L LEVINE
 Mailing Address 16340 W. Arlington Drive
 City State Zip Code
 Libertyville IL 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Senior Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 406.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115670
 Amount of Each Receipt this Period
 19.51

Full Name (Last, First, Middle Initial)
B. CHARLES M LITTLE
 Mailing Address 20 STONEGATE POINT
 City State Zip Code
 HOT SPRINGS AR 71913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company FSL - Growth
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 277.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007130
 Amount of Each Receipt this Period
 13.89

Full Name (Last, First, Middle Initial)
C. CHARLES M LITTLE
 Mailing Address 20 STONEGATE POINT
 City State Zip Code
 HOT SPRINGS AR 71913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company FSL - Growth
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 291.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115669
 Amount of Each Receipt this Period
 13.89

SUBTOTAL of Receipts This Page (optional)..... ▶ 47.29
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 107 OF 220
(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. 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 VP-ATO-Bus Prtn-Claims
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1227.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007201
 Amount of Each Receipt this Period
 61.80

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 VP-ATO-Bus Prtn-Claims
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1289.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115740
 Amount of Each Receipt this Period
 61.80

C. RHONDA J LOWE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2568 Carrington Way
 City State Zip Code
 Frederick MD 21702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Market Claim Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 285.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007096
 Amount of Each Receipt this Period
 14.38

SUBTOTAL of Receipts This Page (optional)..... ▶ 137.98
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 109 OF 220
<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. COREY C LUECHT
Full Name (Last, First, Middle Initial)
Mailing Address 843 Spring Cove Dr

City SCHAUMBURG	State IL	Zip Code 60193
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Real Estate and Facilitie
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
446.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007051

Amount of Each Receipt this Period
22.38

B. COREY C LUECHT
Full Name (Last, First, Middle Initial)
Mailing Address 843 Spring Cove Dr

City SCHAUMBURG	State IL	Zip Code 60193
--------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Real Estate and Facilitie
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-411592

Amount of Each Receipt this Period
22.38

C. BENJAMIN E LUMICAO
Full Name (Last, First, Middle Initial)
Mailing Address 9655 Woods Drive Unit 708

City Skokie	State IL	Zip Code 60077
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
695.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007070

Amount of Each Receipt this Period
34.83

SUBTOTAL of Receipts This Page (optional).....	79.59
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 110 OF 220
(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. BENJAMIN E LUMICAO
 Full Name (Last, First, Middle Initial)
 Mailing Address 9655 Woods Drive Unit 708
 City Skokie State IL Zip Code 60077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **729.85**

Date of Receipt **10 / 18 / 2013**
Transaction ID : A2013-4115610
 Amount of Each Receipt this Period **34.83**

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-SAL-Regional Presiden
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **2172.45**

Date of Receipt **10 / 04 / 2013**
Transaction ID : A2013-4007198
 Amount of Each Receipt this Period **109.34**

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-SAL-Regional Presiden
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **2281.79**

Date of Receipt **10 / 18 / 2013**
Transaction ID : A2013-4115737
 Amount of Each Receipt this Period **109.34**

SUBTOTAL of Receipts This Page (optional)..... ▶ **253.51**
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 111 OF 220
(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. DANIEL J MACDONALD			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>/</td> <td>04</td> <td>/</td> <td>2013</td> </tr> </table> Transaction ID : A2013-4007120	M M M	/	D D D	/	Y Y Y Y Y Y	10	/	04	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y									
10	/	04	/	2013									
Mailing Address 2250 RIDGETRAIL DR			Amount of Each Receipt this Period <table border="1"> <tr> <td>22.45</td> </tr> </table>	22.45									
22.45													
City CASTLE ROCK	State CO	Zip Code 80104											
FEC ID number of contributing federal political committee. C													
Name of Employer Allstate Insurance Company	Occupation FSL - Growth												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>448.96</td> </tr> </table>		448.96										
448.96													

Full Name (Last, First, Middle Initial) B. DANIEL J MACDONALD			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>/</td> <td>18</td> <td>/</td> <td>2013</td> </tr> </table> Transaction ID : A2013-4115659	M M M	/	D D D	/	Y Y Y Y Y Y	10	/	18	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y									
10	/	18	/	2013									
Mailing Address 2250 RIDGETRAIL DR			Amount of Each Receipt this Period <table border="1"> <tr> <td>22.45</td> </tr> </table>	22.45									
22.45													
City CASTLE ROCK	State CO	Zip Code 80104											
FEC ID number of contributing federal political committee. C													
Name of Employer Allstate Insurance Company	Occupation FSL - Growth												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>471.41</td> </tr> </table>		471.41										
471.41													

Full Name (Last, First, Middle Initial) C. KENNETH P MARCOTTE			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>/</td> <td>04</td> <td>/</td> <td>2013</td> </tr> </table> Transaction ID : A2013-4007004	M M M	/	D D D	/	Y Y Y Y Y Y	10	/	04	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y									
10	/	04	/	2013									
Mailing Address 2311 HAVERTON DR			Amount of Each Receipt this Period <table border="1"> <tr> <td>22.48</td> </tr> </table>	22.48									
22.48													
City MUNDELEIN	State IL	Zip Code 60060											
FEC ID number of contributing federal political committee. C													
Name of Employer Allstate Insurance Company	Occupation Accounting Director												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>447.13</td> </tr> </table>		447.13										
447.13													

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>67.38</td> </tr> </table>	67.38
67.38		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 112 OF 220
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. KENNETH P MARCOTTE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2311 HAVERTON DR
 City State Zip Code
 MUNDELEIN IL 60060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Accounting Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 469.61

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115546
 Amount of Each Receipt this Period
 22.48

B. Rhonda J Masser
 Full Name (Last, First, Middle Initial)
 Mailing Address 4807 Wildwood Dr
 City State Zip Code
 McHenry IL 60051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company HR-Client Partnership-Dir
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 401.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006983
 Amount of Each Receipt this Period
 20.29

C. Rhonda J Masser
 Full Name (Last, First, Middle Initial)
 Mailing Address 4807 Wildwood Dr
 City State Zip Code
 McHenry IL 60051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company HR-Client Partnership-Dir
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 422.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115525
 Amount of Each Receipt this Period
 20.29

SUBTOTAL of Receipts This Page (optional).....	▶	63.06
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 113 OF 220
<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 R MATHEWS
Full Name (Last, First, Middle Initial)

Mailing Address 401 E NORTH AVENUE

City LAKE BLUFF State IL Zip Code 60044

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **447.34**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007071

Amount of Each Receipt this Period
22.43

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

Mailing Address 401 E NORTH AVENUE

City LAKE BLUFF State IL Zip Code 60044

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **469.77**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115611

Amount of Each Receipt this Period
22.43

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

Mailing Address 25748 N. Stoney Kirk Ct.

City Hawthorn Woods State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **841.91**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007020

Amount of Each Receipt this Period
42.19

SUBTOTAL of Receipts This Page (optional).....▶	87.05
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 114 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. JOHN A MC LAUGHLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 25748 N. Stoney Kirk Ct.
 City Hawthorn Woods State IL Zip Code 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 884.10

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115561
 Amount of Each Receipt this Period
 42.19

B. SALLY J MCCARTHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1036 ROLLING PASS
 City GLENVIEW State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Sales Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 492.40

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007056
 Amount of Each Receipt this Period
 24.62

C. SALLY J MCCARTHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1036 ROLLING PASS
 City GLENVIEW State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Sales Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 517.02

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115596
 Amount of Each Receipt this Period
 24.62

SUBTOTAL of Receipts This Page (optional)..... ▶ 91.43
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 115 OF 220
(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. LINDA H MCCLELLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5561 Hilltop Lane
 City State Zip Code
 Libertyville IL 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Market Claim Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 309.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007134
 Amount of Each Receipt this Period
 15.58

B. LINDA H MCCLELLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5561 Hilltop Lane
 City State Zip Code
 Libertyville IL 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Market Claim Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115673
 Amount of Each Receipt this Period
 15.58

C. SCOTT A MCCONNELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 748 FOXMOOR LANE
 City State Zip Code
 LAKE ZURICH IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company INV-IT Capital Markets-Di
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 324.05

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006980
 Amount of Each Receipt this Period
 19.91

SUBTOTAL of Receipts This Page (optional)..... ▶ 51.07
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 116 OF 220
	<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. SCOTT A MCCONNELL
Full Name (Last, First, Middle Initial)
Mailing Address 748 FOXMOOR LANE

City LAKE ZURICH	State IL	Zip Code 60047
---------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation INV-IT Capital Markets-Di
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **343.96**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115522

Amount of Each Receipt this Period

18.91

B. JOSEPH P MCCORMICK
Full Name (Last, First, Middle Initial)
Mailing Address 808 PARKDALE CT.

City SOUTHLAKE	State TX	Zip Code 76092
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Corp Rel Director
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **379.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006942

Amount of Each Receipt this Period

18.95

C. JOSEPH P MCCORMICK
Full Name (Last, First, Middle Initial)
Mailing Address 808 PARKDALE CT.

City SOUTHLAKE	State TX	Zip Code 76092
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Corp Rel Director
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **397.95**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115484

Amount of Each Receipt this Period

18.95

SUBTOTAL of Receipts This Page (optional).....▶	57.81
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 220
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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		<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. LEE L McElroy

Mailing Address 7808 ROYAL SYDNEY DR

City GAINESVILLE	State VA	Zip Code 20155
---------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Regional Financial Sales
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **326.84**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007165

Amount of Each Receipt this Period

16.45

Full Name (Last, First, Middle Initial)
B. LEE L McElroy

Mailing Address 7808 ROYAL SYDNEY DR

City GAINESVILLE	State VA	Zip Code 20155
---------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Regional Financial Sales
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **343.29**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115704

Amount of Each Receipt this Period

16.45

Full Name (Last, First, Middle Initial)
C. MARK A MCGILLIVRAY

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-CLM-Centralized Servi
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.69**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007158

Amount of Each Receipt this Period

31.71

SUBTOTAL of Receipts This Page (optional).....▶	64.61
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 220
	<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. MARK A MCGILLIVRAY
Full Name (Last, First, Middle Initial)

Mailing Address 1028 PORTSMOUTH CIRCLE

City	State	Zip Code
GURNEE	IL	60031

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

Name of Employer	Occupation
Allstate Insurance Company	SVP-CLM-Centralized Servi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **662.40**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115697

Amount of Each Receipt this Period

45.40

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

Mailing Address 11 Larkspur Drive

City	State	Zip Code
Smithtown	NY	11787

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **903.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007156

Amount of Each Receipt this Period

45.40

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

Mailing Address 11 Larkspur Drive

City	State	Zip Code
Smithtown	NY	11787

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **948.90**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115695

Amount of Each Receipt this Period

45.40

SUBTOTAL of Receipts This Page (optional).....▶	122.51
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JEFFREY J MCRAE		Date of Receipt
Mailing Address 83 Arcadia Lane		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code LAKE ZURICH IL 60047		Transaction ID : A2013-4006969
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="28.07"/>
Name of Employer Allstate Insurance Company	Occupation SVP-PF-Strategy & Plannin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="557.13"/>	

Full Name (Last, First, Middle Initial) B. JEFFREY J MCRAE		Date of Receipt
Mailing Address 83 Arcadia Lane		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code LAKE ZURICH IL 60047		Transaction ID : A2013-4115511
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="28.07"/>
Name of Employer Allstate Insurance Company	Occupation SVP-PF-Strategy & Plannin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="585.20"/>	

Full Name (Last, First, Middle Initial) C. Jesse E Merten		Date of Receipt
Mailing Address 3311 Brook Rd.		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code Highland Park IL 60035		Transaction ID : A2013-4007202
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="66.46"/>
Name of Employer Allstate Insurance Company	Occupation SVP-AF-Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1315.70"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="122.60"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 120 OF 220
(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. Jesse E Merten
 Full Name (Last, First, Middle Initial)
 Mailing Address 3311 Brook Rd.
 City Highland Park State IL Zip Code 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-AF-Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1382.16

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115741
 Amount of Each Receipt this Period
 66.46

B. HANS H METZINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 E. CLAIRE LANE
 City PROSPECT HTS State IL Zip Code 60070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Sales Support Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 367.32

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007044
 Amount of Each Receipt this Period
 18.51

C. HANS H METZINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 E. CLAIRE LANE
 City PROSPECT HTS State IL Zip Code 60070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Sales Support Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.83

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115585
 Amount of Each Receipt this Period
 18.51

SUBTOTAL of Receipts This Page (optional)..... ▶ 103.48
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 121 OF 220
(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. JOHN W MICHELI
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Church St.
 City LIBERTYVILLE State IL Zip Code 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SOG-Protection Progra
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 414.34

Date of Receipt 10 / 04 / 2013
Transaction ID : A2013-4006906
 Amount of Each Receipt this Period 20.87

B. JOHN W MICHELI
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Church St.
 City LIBERTYVILLE State IL Zip Code 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation SVP-SOG-Protection Progra
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.21

Date of Receipt 10 / 18 / 2013
Transaction ID : A2013-4115448
 Amount of Each Receipt this Period 20.87

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 Territorial Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 637.69

Date of Receipt 10 / 04 / 2013
Transaction ID : A2013-4006979
 Amount of Each Receipt this Period 31.99

SUBTOTAL of Receipts This Page (optional)..... ▶ 73.73
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 122 OF 220
(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. 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 Territorial Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115521
 Amount of Each Receipt this Period
 31.99

B. STEVEN M MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1011 Redwood Drive
 City ALGONQUIN State IL Zip Code 60102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-ATO-Bus Prtn-Product O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 486.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007099
 Amount of Each Receipt this Period
 24.42

C. STEVEN M MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1011 Redwood Drive
 City ALGONQUIN State IL Zip Code 60102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation VP-ATO-Bus Prtn-Product O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115639
 Amount of Each Receipt this Period
 24.42

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.83
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 123 OF 220
(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. AMY B MILLS

Mailing Address 942 Forest Avenue

City State Zip Code
 Deerfield IL 60015

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

Name of Employer Occupation
 Allstate Insurance Company Risk Mgmt-NCS Integration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 386.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007175

Amount of Each Receipt this Period
 19.47

Full Name (Last, First, Middle Initial)
B. AMY B MILLS

Mailing Address 942 Forest Avenue

City State Zip Code
 Deerfield IL 60015

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

Name of Employer Occupation
 Allstate Insurance Company Risk Mgmt-NCS Integration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 406.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115714

Amount of Each Receipt this Period
 19.47

Full Name (Last, First, Middle Initial)
C. ALLISON MISQUEZ

Mailing Address 578 Patriot Court

City State Zip Code
 Gurnee IL 60031

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 291.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007163

Amount of Each Receipt this Period
 14.62

SUBTOTAL of Receipts This Page (optional)..... ▶ 53.56

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 220
	<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. ALLISON MISQUEZ
Full Name (Last, First, Middle Initial)

Mailing Address 578 Patriot Court

City Gurnee State IL Zip Code 60031

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **306.39**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115702

Amount of Each Receipt this Period
14.62

B. MARCIE E MOLEK
Full Name (Last, First, Middle Initial)

Mailing Address 400 KEVIN LANE

City GRAYSLAKE State IL Zip Code 60030

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

Name of Employer Allstate Insurance Company Occupation VP-CLM-Claims Technical E

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.39**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007011

Amount of Each Receipt this Period
53.74

C. MARCIE E MOLEK
Full Name (Last, First, Middle Initial)

Mailing Address 400 KEVIN LANE

City GRAYSLAKE State IL Zip Code 60030

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

Name of Employer Allstate Insurance Company Occupation VP-CLM-Claims Technical E

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **803.13**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115553

Amount of Each Receipt this Period
53.74

SUBTOTAL of Receipts This Page (optional)..... **122.10**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 125 OF 220
	(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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES R MOSELEY III III			Date of Receipt
Mailing Address 1709 Montclair Blvd			<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : A2013-4006956
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="16.58"/>
Name of Employer	Occupation		
Allstate Insurance Company	HR-Client Partner Field B		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="329.26"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JAMES R MOSELEY III III			Date of Receipt
Mailing Address 1709 Montclair Blvd			<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : A2013-4115498
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="16.58"/>
Name of Employer	Occupation		
Allstate Insurance Company	HR-Client Partner Field B		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="345.84"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MEGHAN O MULVIHILL			Date of Receipt
Mailing Address 2445 CHERRY LANE			<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : A2013-4006947
NORTHBROOK	IL	60062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="39.27"/>
Name of Employer	Occupation		
Allstate Insurance Company	Corporate Counsel		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="781.93"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="72.43"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 126 OF 220
(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. MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **821.20**

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115489

Amount of Each Receipt this Period
39.27

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

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **865.68**

Date of Receipt
10 / 04 / 2013
Transaction ID : A2013-4006999

Amount of Each Receipt this Period
43.57

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

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **909.25**

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115541

Amount of Each Receipt this Period
43.57

SUBTOTAL of Receipts This Page (optional)..... ▶ **126.41**

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 127 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City State Zip Code
 Arlington Heights IL 60004

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

Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 837.91

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007137

Amount of Each Receipt this Period
 41.99

Full Name (Last, First, Middle Initial)
B. MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City State Zip Code
 Arlington Heights IL 60004

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

Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 879.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115676

Amount of Each Receipt this Period
 41.99

Full Name (Last, First, Middle Initial)
C. DON J MYKETIAK

Mailing Address 28W770 HAWTHORNE LANE

City State Zip Code
 WEST CHICAGO IL 60185

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

Name of Employer Occupation
 Allstate Insurance Company Sr. Manager Accounting/Fi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 294.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007043

Amount of Each Receipt this Period
 14.82

SUBTOTAL of Receipts This Page (optional)..... ▶ 98.80

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 220
	<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. DON J MYKETIAK
Full Name (Last, First, Middle Initial)

Mailing Address 28W770 HAWTHORNE LANE

City WEST CHICAGO	State IL	Zip Code 60185
----------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Sr. Manager Accounting/Fi
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **309.15**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115584

Amount of Each Receipt this Period

14.82

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

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-LGL-Protection Law
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1298.26**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007089

Amount of Each Receipt this Period

65.41

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

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-LGL-Protection Law
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1363.67**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115629

Amount of Each Receipt this Period

65.41

SUBTOTAL of Receipts This Page (optional).....▶	145.64
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 129 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 22451 THORNBURY CT

City State Zip Code
 DEER PARK IL 60010

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

Name of Employer Occupation
 Allstate Insurance Company SVP-LGL-Enterprise Busine

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1220.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007139

Amount of Each Receipt this Period
 61.43

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

Mailing Address 22451 THORNBURY CT

City State Zip Code
 DEER PARK IL 60010

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

Name of Employer Occupation
 Allstate Insurance Company SVP-LGL-Enterprise Busine

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1281.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115678

Amount of Each Receipt this Period
 61.43

Full Name (Last, First, Middle Initial)
C. THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City State Zip Code
 WAUKEGAN IL 60085

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 639.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007082

Amount of Each Receipt this Period
 31.97

SUBTOTAL of Receipts This Page (optional)..... ▶ 154.83

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City State Zip Code
WAUKEGAN IL 60085

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
671.37

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115622

Amount of Each Receipt this Period
31.97

Full Name (Last, First, Middle Initial)
B. RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.41

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4006984

Amount of Each Receipt this Period
21.69

Full Name (Last, First, Middle Initial)
C. RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
453.10

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115526

Amount of Each Receipt this Period
21.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.35

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

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

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

FOR LINE NUMBER: PAGE 131 OF 220
(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 O'MALLEY

Mailing Address 1816 ASPEN LANE

City State Zip Code
 MOUNT PROSPECT IL 60056

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

Name of Employer Occupation
 Allstate Insurance Company HR-Retirement-Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 340.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007065

Amount of Each Receipt this Period
 17.08

Full Name (Last, First, Middle Initial)
B. JOHN O'MALLEY

Mailing Address 1816 ASPEN LANE

City State Zip Code
 MOUNT PROSPECT IL 60056

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

Name of Employer Occupation
 Allstate Insurance Company HR-Retirement-Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 358.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115605

Amount of Each Receipt this Period
 17.08

Full Name (Last, First, Middle Initial)
C. MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
 NAPERVILLE IL 60565

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

Name of Employer Occupation
 Allstate Insurance Company FSL - Growth

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 546.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006915

Amount of Each Receipt this Period
 27.47

SUBTOTAL of Receipts This Page (optional)..... ▶ 61.63

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 220
	<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. MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
NAPERVILLE IL 60565

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

Name of Employer Occupation
Allstate Insurance Company FSL - Growth

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
574.44

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115457

Amount of Each Receipt this Period
27.47

Full Name (Last, First, Middle Initial)
B. BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City State Zip Code
MT PROSPECT IL 60056

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.71

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007073

Amount of Each Receipt this Period
11.20

Full Name (Last, First, Middle Initial)
C. BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City State Zip Code
MT PROSPECT IL 60056

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.91

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115613

Amount of Each Receipt this Period
11.20

SUBTOTAL of Receipts This Page (optional)..... ▶ 49.87

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

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

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

FOR LINE NUMBER: PAGE 133 OF 220
(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. MICHAEL C OCONNOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1231 Isabella Street
 City Evanston State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Marketing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.69

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007001
 Amount of Each Receipt this Period
 15.29

B. MICHAEL C OCONNOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1231 Isabella Street
 City Evanston State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Marketing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.98

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115543
 Amount of Each Receipt this Period
 15.29

C. ROGER D ODLE II
 Full Name (Last, First, Middle Initial)
 Mailing Address 5170 BARCROFT DRIVE
 City HOFFMAN ESTATES State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Prod Ops Sr State Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 930.63

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007063
 Amount of Each Receipt this Period
 46.84

SUBTOTAL of Receipts This Page (optional)..... ▶ 77.42
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 220
	<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. ROGER D ODLE II

Mailing Address 5170 BARCROFT DRIVE

City	State	Zip Code
HOFFMAN ESTATES	IL	60010

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

Name of Employer	Occupation
Allstate Insurance Company	Prod Ops Sr State Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **977.47**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115603

Amount of Each Receipt this Period

46.84

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

Mailing Address 361 KELBURN RD. #315

City	State	Zip Code
DEERFIELD	IL	60015

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

Name of Employer	Occupation
Allstate Insurance Company	Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **819.60**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006973

Amount of Each Receipt this Period

41.07

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

Mailing Address 361 KELBURN RD. #315

City	State	Zip Code
DEERFIELD	IL	60015

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

Name of Employer	Occupation
Allstate Insurance Company	Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **860.67**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115515

Amount of Each Receipt this Period

41.07

SUBTOTAL of Receipts This Page (optional).....▶	128.98
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 135 OF 220
(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. PAMELA J OVERTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 23475 W. Newhaven Dr.
 City State Zip Code
 Hawthorn Woods IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-CLM-Claims Product Lin
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 980.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006967
 Amount of Each Receipt this Period
 49.30

B. PAMELA J OVERTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 23475 W. Newhaven Dr.
 City State Zip Code
 Hawthorn Woods IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-CLM-Claims Product Lin
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1029.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115509
 Amount of Each Receipt this Period
 49.30

C. DEAN T PAPPAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3406 VICEROY COURT
 City State Zip Code
 EDGEWATER MD 21037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-LGL-Legislative & Regu
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 993.21

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006943
 Amount of Each Receipt this Period
 50.25

SUBTOTAL of Receipts This Page (optional)..... ▶ 148.85
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 136 OF 220
(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. DEAN T PAPPAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3406 VICEROY COURT
 City State Zip Code
 EDGEWATER MD 21037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-LGL-Legislative & Regu
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1043.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115485
 Amount of Each Receipt this Period
 50.25

B. MAYUR M PATEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 742 E PARKVIEW CT
 City State Zip Code
 ROSELLE IL 60172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company ATO-Manager-Sr Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 646.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007017
 Amount of Each Receipt this Period
 16.58

C. LAURIE PELLOUCHOUD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1447 PLEASANT
 City State Zip Code
 GLENVIEW IL 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-PRD-Homeowners
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 881.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007084
 Amount of Each Receipt this Period
 44.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 111.33
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 137 OF 220
(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. LAURIE PELLOUCHOUD
 Mailing Address 1447 PLEASANT
 City State Zip Code
 GLENVIEW IL 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-PRD-Homeowners
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 926.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115624
 Amount of Each Receipt this Period
 44.50

Full Name (Last, First, Middle Initial)
B. NANCY A PERRY
 Mailing Address 3575 CALDERWOOD DR
 City State Zip Code
 ROCKFORD IL 61114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company HR-Client Partnership-Dir
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 427.61

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007061
 Amount of Each Receipt this Period
 21.43

Full Name (Last, First, Middle Initial)
C. NANCY A PERRY
 Mailing Address 3575 CALDERWOOD DR
 City State Zip Code
 ROCKFORD IL 61114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company HR-Client Partnership-Dir
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 449.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115601
 Amount of Each Receipt this Period
 21.43

SUBTOTAL of Receipts This Page (optional)..... ▶ 87.36
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 138 OF 220
(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. Opal G Perry

Mailing Address 1406 Rosalie St.

City State Zip Code
 Evanston IL 60201

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

Name of Employer Occupation
 Allstate Insurance Company VP-ATO-Testing & Release

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 364.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007207

Amount of Each Receipt this Period
 45.60

Full Name (Last, First, Middle Initial)
B. Opal G Perry

Mailing Address 1406 Rosalie St.

City State Zip Code
 Evanston IL 60201

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

Name of Employer Occupation
 Allstate Insurance Company VP-ATO-Testing & Release

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 410.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115746

Amount of Each Receipt this Period
 45.60

Full Name (Last, First, Middle Initial)
C. THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code
 NAPERVILLE IL 60565

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 689.71

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007179

Amount of Each Receipt this Period
 34.60

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.80

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 220
	<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. THOMAS S PETERSON
Full Name (Last, First, Middle Initial)
Mailing Address 2756 BRECKENRIDGE LANE

City NAPERVILLE	State IL	Zip Code 60565
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **724.31**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115718

Amount of Each Receipt this Period

34.60

B. JOHN C PINTOZZI
Full Name (Last, First, Middle Initial)
Mailing Address 2114 W Cortland ST

City CHICAGO	State IL	Zip Code 60647
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1029.04**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006989

Amount of Each Receipt this Period

40.62

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 ▼ **1069.66**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115531

Amount of Each Receipt this Period

40.62

SUBTOTAL of Receipts This Page (optional).....▶	115.84
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 140 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. RICHARD E PORTER
Full Name (Last, First, Middle Initial)
Mailing Address 20827 36TH PL W

City LYNNWOOD	State WA	Zip Code 98036
------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Staff Claims Service Adju
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007160

Amount of Each Receipt this Period
10.67

B. RICHARD E PORTER
Full Name (Last, First, Middle Initial)
Mailing Address 20827 36TH PL W

City LYNNWOOD	State WA	Zip Code 98036
------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Staff Claims Service Adju
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
223.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115699

Amount of Each Receipt this Period
10.67

C. DAVID J PRENDERGAST
Full Name (Last, First, Middle Initial)
Mailing Address 8262 Arrowleaf Turn

City Gainesville	State VA	Zip Code 20155
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1236.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006905

Amount of Each Receipt this Period
82.21

SUBTOTAL of Receipts This Page (optional).....▶	103.55
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 220
	<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. DAVID J PRENDERGAST		Date of Receipt
Mailing Address 8262 Arrowleaf Turn		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
Gainesville	VA	20155
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2013-4115447
Name of Employer	Occupation	Amount of Each Receipt this Period
Allstate Insurance Company	SVP-SAL-Regional Presiden	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1311.02"/>	

Full Name (Last, First, Middle Initial) B. THOMAS G PURTELL		Date of Receipt
Mailing Address 22663 CHESHIRE COURT		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
DEER PARK	IL	60010
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2013-4007086
Name of Employer	Occupation	Amount of Each Receipt this Period
Allstate Insurance Company	Sales Director	<input type="text" value="26.64"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="527.67"/>	

Full Name (Last, First, Middle Initial) C. THOMAS G PURTELL		Date of Receipt
Mailing Address 22663 CHESHIRE COURT		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
DEER PARK	IL	60010
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2013-4115626
Name of Employer	Occupation	Amount of Each Receipt this Period
Allstate Insurance Company	Sales Director	<input type="text" value="26.64"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="554.31"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="128.28"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 142 OF 220
(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 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 Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 896.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007111

Amount of Each Receipt this Period
 45.00

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

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code
 ARLINGTON HEIGH IL 60005

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

Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 941.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115650

Amount of Each Receipt this Period
 45.00

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

Mailing Address 618 Burdick St.

City State Zip Code
 LIBERTYVILLE IL 60048

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 821.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007024

Amount of Each Receipt this Period
 41.33

SUBTOTAL of Receipts This Page (optional)..... ▶ 131.33

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 618 Burdick St.

City LIBERTYVILLE State IL Zip Code 60048

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **862.53**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115565

Amount of Each Receipt this Period
41.33

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

Mailing Address 5926 W. 90TH PLACE

City OAK LAWN State IL Zip Code 60453

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1168.77**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007028

Amount of Each Receipt this Period
59.01

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

Mailing Address 5926 W. 90TH PLACE

City OAK LAWN State IL Zip Code 60453

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1227.78**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115569

Amount of Each Receipt this Period
59.01

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 220
	<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. ROGER S ROBINSON
Full Name (Last, First, Middle Initial)
Mailing Address 2529 Rolling Oaks Drive

City Palm Harbor	State FL	Zip Code 34683
---------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Corp Rel Regional Sr Man
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **508.62**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006962

Amount of Each Receipt this Period

96.06

B. ROGER S ROBINSON
Full Name (Last, First, Middle Initial)
Mailing Address 2529 Rolling Oaks Drive

City Palm Harbor	State FL	Zip Code 34683
---------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Corp Rel Regional Sr Man
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **534.22**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115504

Amount of Each Receipt this Period

25.60

C. GREGORY C ROHLFING
Full Name (Last, First, Middle Initial)
Mailing Address 106 ASHLAND

City RIVER FOREST	State IL	Zip Code 60305
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **894.23**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006987

Amount of Each Receipt this Period

44.86

SUBTOTAL of Receipts This Page (optional).....▶	96.06
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 145 OF 220
(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. GREGORY C ROHLFING
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 ASHLAND
 City RIVER FOREST State IL Zip Code 60305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 939.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-411529
 Amount of Each Receipt this Period
 44.86

B. ANDREW R ROMERO
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 BENETO CT
 City FOLSOM State CA Zip Code 95630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Regional Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 369.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007155
 Amount of Each Receipt this Period
 18.62

C. ANDREW R ROMERO
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 BENETO CT
 City FOLSOM State CA Zip Code 95630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Regional Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 388.59

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115694
 Amount of Each Receipt this Period
 18.62

SUBTOTAL of Receipts This Page (optional)..... ▶ 82.10
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 3371 VENARD RD.

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **882.34**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115602

Amount of Each Receipt this Period

42.28

B. DONALD L RUDD
Full Name (Last, First, Middle Initial)

Mailing Address 25 CRESTVIEW TERRACE

City BUFFALO GROVE	State IL	Zip Code 60089
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **293.89**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007145

Amount of Each Receipt this Period

14.76

C. DONALD L RUDD
Full Name (Last, First, Middle Initial)

Mailing Address 25 CRESTVIEW TERRACE

City BUFFALO GROVE	State IL	Zip Code 60089
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **308.65**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115684

Amount of Each Receipt this Period

14.76

SUBTOTAL of Receipts This Page (optional).....▶	71.80
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 220
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. CASSANDRA C RUSSELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 37194 N Dillon Ct
 City Lake Villa State IL Zip Code 60046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Claims Senior Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.93

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007127
 Amount of Each Receipt this Period
 15.85

B. CASSANDRA C RUSSELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 37194 N Dillon Ct
 City Lake Villa State IL Zip Code 60046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Claims Senior Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.78

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115666
 Amount of Each Receipt this Period
 15.85

C. DOREEN M RYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 ALSTON COURT
 City RED BANK State NJ Zip Code 07701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Managing Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 467.97

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006927
 Amount of Each Receipt this Period
 23.45

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.15
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 220
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. DOREEN M RYAN

Mailing Address 17 ALSTON COURT

City State Zip Code
RED BANK NJ 07701

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

Name of Employer Occupation
Allstate Insurance Company Managing Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
491.42

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115469

Amount of Each Receipt this Period
23.45

Full Name (Last, First, Middle Initial)
B. PAUL R RYSKE

Mailing Address 898 LONGWOOD DR.

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
890.04

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006985

Amount of Each Receipt this Period
44.70

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

Mailing Address 898 LONGWOOD DR.

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
934.74

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115527

Amount of Each Receipt this Period
44.70

SUBTOTAL of Receipts This Page (optional).....▶	112.85
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 150 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. Donald D Sands

Mailing Address 321 North Brainard Avenue

City State Zip Code
 Lagrange Park IL 60526

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

Name of Employer Occupation
 Allstate Insurance Company VP-SOG-Protection Project

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1093.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007192

Amount of Each Receipt this Period
 55.38

Full Name (Last, First, Middle Initial)
B. Donald D Sands

Mailing Address 321 North Brainard Avenue

City State Zip Code
 Lagrange Park IL 60526

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

Name of Employer Occupation
 Allstate Insurance Company VP-SOG-Protection Project

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1148.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115731

Amount of Each Receipt this Period
 55.38

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

Mailing Address 4517 WAUBANSIE LANE

City State Zip Code
 LISLE IL 60532

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

Name of Employer Occupation
 Allstate Insurance Company Real Estate and Facilitie

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 303.37

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007104

Amount of Each Receipt this Period
 15.27

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.03

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

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

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

FOR LINE NUMBER: PAGE 151 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)
A. PATRICK J SARB

Mailing Address 4517 WAUBANSIE LANE

City State Zip Code
 LISLE IL 60532

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

Name of Employer Occupation
 Allstate Insurance Company Real Estate and Facilitie

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 318.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115644

Amount of Each Receipt this Period
 15.27

Full Name (Last, First, Middle Initial)
B. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City State Zip Code
 Tierra Verde FL 33715

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

Name of Employer Occupation
 Allstate Insurance Company Claim-Sr Claim Field Dire

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 320.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007030

Amount of Each Receipt this Period
 16.16

Full Name (Last, First, Middle Initial)
C. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City State Zip Code
 Tierra Verde FL 33715

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

Name of Employer Occupation
 Allstate Insurance Company Claim-Sr Claim Field Dire

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 336.39

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115571

Amount of Each Receipt this Period
 16.16

SUBTOTAL of Receipts This Page (optional)..... ▶ 47.59

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 220
	<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. PATRICK J SCHNEIDER			Date of Receipt
Mailing Address 210 NORTH TRAIL			<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : A2013-4007066
HAWTHORN WOODS	IL	60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="36.54"/>
Name of Employer	Occupation		
Allstate Insurance Company	ATO-Manager-Sr Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="726.03"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. PATRICK J SCHNEIDER			Date of Receipt
Mailing Address 210 NORTH TRAIL			<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : A2013-4115606
HAWTHORN WOODS	IL	60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="36.54"/>
Name of Employer	Occupation		
Allstate Insurance Company	ATO-Manager-Sr Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="762.57"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. STEPHEN E SCHOLL			Date of Receipt
Mailing Address 7 COPPERFIELD DRIVE			<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : A2013-4006930
HAWTHORN WOODS	IL	60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="58.91"/>
Name of Employer	Occupation		
Allstate Insurance Company	VP-HR-HR Business Partner		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1173.02"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="131.99"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 220
	<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. 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 ▼ 1231.93

Date of Receipt 10 / 18 / 2013
Transaction ID : A2013-4115472
 Amount of Each Receipt this Period 58.91

B. DALE J SCHUELLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Scarlet Oak Rd
 City Flemington State NJ Zip Code 08822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Regional Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.26

Date of Receipt 10 / 04 / 2013
Transaction ID : A2013-4007143
 Amount of Each Receipt this Period 21.11

C. DALE J SCHUELLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Scarlet Oak Rd
 City Flemington State NJ Zip Code 08822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Regional Sales Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.37

Date of Receipt 10 / 18 / 2013
Transaction ID : A2013-4115682
 Amount of Each Receipt this Period 21.11

SUBTOTAL of Receipts This Page (optional).....▶ 101.13
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 154 OF 220
	<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. Shayna M Schulz
Full Name (Last, First, Middle Initial)
Mailing Address 1523 Sheridan Road
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-MRK-Customer Contact C
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **319.40**

Date of Receipt **10 / 04 / 2013**
Transaction ID : A2013-4007193
Amount of Each Receipt this Period **16.15**

B. Shayna M Schulz
Full Name (Last, First, Middle Initial)
Mailing Address 1523 Sheridan Road
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-MRK-Customer Contact C
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **335.55**

Date of Receipt **10 / 18 / 2013**
Transaction ID : A2013-4115732
Amount of Each Receipt this Period **16.15**

C. PAUL SCHUTT
Full Name (Last, First, Middle Initial)
Mailing Address 6323 N. NORMANDY
City CHICAGO State IL Zip Code 60631
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP-INV-Finance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **1084.00**

Date of Receipt **10 / 04 / 2013**
Transaction ID : A2013-4007027
Amount of Each Receipt this Period **54.20**

SUBTOTAL of Receipts This Page (optional)..... **86.50**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 155 OF 220
(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. PAUL SCHUTT

Mailing Address 6323 N. NORMANDY

City State Zip Code
 CHICAGO IL 60631

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1138.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115568

Amount of Each Receipt this Period
 54.20

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

Mailing Address 128 Waverly Circle

City State Zip Code
 Phoenixville PA 19460

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1061.61

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007119

Amount of Each Receipt this Period
 53.20

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

Mailing Address 128 Waverly Circle

City State Zip Code
 Phoenixville PA 19460

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1114.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115568

Amount of Each Receipt this Period
 53.20

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.60

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

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

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

FOR LINE NUMBER: PAGE 156 OF 220
(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. ALBERT SCHWARZHAUPT
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 Doral Drive
 City State Zip Code
 Hawthorn Woods IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Sr. Sales Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 355.22

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006913
 Amount of Each Receipt this Period
 17.84

B. ALBERT SCHWARZHAUPT
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 Doral Drive
 City State Zip Code
 Hawthorn Woods IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Sr. Sales Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 373.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115455
 Amount of Each Receipt this Period
 17.84

C. STACY Y SHARPE
 Full Name (Last, First, Middle Initial)
 Mailing Address 616 E Street NW #649
 City State Zip Code
 Washington DC 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-SAL-Field Vice Preside
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 956.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007057
 Amount of Each Receipt this Period
 48.13

SUBTOTAL of Receipts This Page (optional)..... ▶ 83.81
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. STACY Y SHARPE
Full Name (Last, First, Middle Initial)

Mailing Address 616 E Street NW #649

City Washington State DC Zip Code 20004

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1004.43**

Date of Receipt **10 / 18 / 2013**
Transaction ID : **A2013-411597**

Amount of Each Receipt this Period **48.13**

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 SMT-FSS-Chief Financial O

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2769.20**

Date of Receipt **10 / 04 / 2013**
Transaction ID : **A2013-4007034**

Amount of Each Receipt this Period **138.46**

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

Mailing Address 517 ROBINWOOD LANE

City WHEATON State IL Zip Code 60189

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2907.66**

Date of Receipt **10 / 18 / 2013**
Transaction ID : **A2013-4115575**

Amount of Each Receipt this Period **138.46**

SUBTOTAL of Receipts This Page (optional)..... **325.05**

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 158 OF 220
	<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. STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
428.51

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4006981

Amount of Each Receipt this Period
21.52

Full Name (Last, First, Middle Initial)
B. STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.03

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115523

Amount of Each Receipt this Period
21.52

Full Name (Last, First, Middle Initial)
C. ADAM R SHORES

Mailing Address 157 Station Park Circle

City State Zip Code
Grayslake IL 60030

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

Name of Employer Occupation
Allstate Insurance Company Corp Rel Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
543.39

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007174

Amount of Each Receipt this Period
27.92

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.96

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 159 OF 220
(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. ADAM R SHORES

Mailing Address 157 Station Park Circle

City State Zip Code
 Grayslake IL 60030

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

Name of Employer Occupation
 Allstate Insurance Company Corp Rel Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 571.31

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115713

Amount of Each Receipt this Period
 27.92

Full Name (Last, First, Middle Initial)
B. DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
 FAIR OAKS CA 95628

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

Name of Employer Occupation
 Allstate Insurance Company Field Product Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 472.13

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007101

Amount of Each Receipt this Period
 23.71

Full Name (Last, First, Middle Initial)
C. DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
 FAIR OAKS CA 95628

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

Name of Employer Occupation
 Allstate Insurance Company Field Product Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 495.84

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115641

Amount of Each Receipt this Period
 23.71

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.34

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

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

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

FOR LINE NUMBER: PAGE 160 OF 220
(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. JAVIER SILVA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3549 N. OZANAM
 City State Zip Code
 CHICAGO IL 60634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Senior Operations Divisio
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 256.12

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006996
 Amount of Each Receipt this Period
 12.93

B. JAVIER SILVA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3549 N. OZANAM
 City State Zip Code
 CHICAGO IL 60634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Senior Operations Divisio
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 269.05

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115538
 Amount of Each Receipt this Period
 12.93

C. ROBERT L SIMMONS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1146 39th Ave NE
 City State Zip Code
 St Petersburg FL 33703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 708.32

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006922
 Amount of Each Receipt this Period
 35.65

SUBTOTAL of Receipts This Page (optional)..... ▶ 61.51
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 161 OF 220
(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. ROBERT L SIMMONS

Mailing Address 1146 39th Ave NE

City State Zip Code
 St Petersburg FL 33703

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

Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 743.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115464

Amount of Each Receipt this Period
 35.65

Full Name (Last, First, Middle Initial)
B. KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
 BARRINGTON IL 60010

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 834.01

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007152

Amount of Each Receipt this Period
 41.84

Full Name (Last, First, Middle Initial)
C. KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
 BARRINGTON IL 60010

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 875.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115691

Amount of Each Receipt this Period
 41.84

SUBTOTAL of Receipts This Page (optional)..... ▶ **119.33**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. JOHN G SINICKI
Full Name (Last, First, Middle Initial)

Mailing Address 2117 CARROLL CREEK VIEW CT

City FREDERICK	State MD	Zip Code 21702
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Claims Compliance Manager
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006966

Amount of Each Receipt this Period
12.22

B. JOHN G SINICKI
Full Name (Last, First, Middle Initial)

Mailing Address 2117 CARROLL CREEK VIEW CT

City FREDERICK	State MD	Zip Code 21702
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Claims Compliance Manager
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115508

Amount of Each Receipt this Period
12.22

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

Mailing Address 650 Rochelle Terrace

City LOMBARD	State IL	Zip Code 60148
-----------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Risk Management Senior Di
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
783.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007050

Amount of Each Receipt this Period
30.42

SUBTOTAL of Receipts This Page (optional).....▶	54.86
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 163 OF 220
(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. KIMBERLY J SLOANE
 Mailing Address 650 Rochelle Terrace
 City State Zip Code
 LOMBARD IL 60148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Risk Management Senior Di
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
813.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115591
 Amount of Each Receipt this Period
30.42

Full Name (Last, First, Middle Initial)
B. ANN M SMITH
 Mailing Address 16801 Carmichael Place
 City State Zip Code
 Purcellville VA 20132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Sales Support Leader
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
323.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4006891
 Amount of Each Receipt this Period
16.23

Full Name (Last, First, Middle Initial)
C. ANN M SMITH
 Mailing Address 16801 Carmichael Place
 City State Zip Code
 Purcellville VA 20132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Sales Support Leader
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
339.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115434
 Amount of Each Receipt this Period
16.23

SUBTOTAL of Receipts This Page (optional)..... ▶ **62.88**
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 164 OF 220
(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. CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Occupation
Allstate Insurance Company Senior Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
737.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007122

Amount of Each Receipt this Period
36.98

Full Name (Last, First, Middle Initial)
B. CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Occupation
Allstate Insurance Company Senior Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
774.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115661

Amount of Each Receipt this Period
36.98

Full Name (Last, First, Middle Initial)
C. KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007035

Amount of Each Receipt this Period
18.51

SUBTOTAL of Receipts This Page (optional)..... ▶ 92.47

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

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

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

FOR LINE NUMBER: PAGE 165 OF 220
(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. KATHERINE A SMITH

Mailing Address **231 KAINER AVENUE**

City **BARRINGTON** State **IL** Zip Code **60010**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.34**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115576

Amount of Each Receipt this Period
18.51

Full Name (Last, First, Middle Initial)
B. KENNETH D SMITH

Mailing Address **619 N HUMPHREY AVE.**

City **OAK PARK** State **IL** Zip Code **60302**

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

Name of Employer **Allstate Insurance Company** Occupation **Real Estate and Facilitie**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.32**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007059

Amount of Each Receipt this Period
17.20

Full Name (Last, First, Middle Initial)
C. KENNETH D SMITH

Mailing Address **619 N HUMPHREY AVE.**

City **OAK PARK** State **IL** Zip Code **60302**

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

Name of Employer **Allstate Insurance Company** Occupation **Real Estate and Facilitie**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **328.52**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115599

Amount of Each Receipt this Period
17.20

SUBTOTAL of Receipts This Page (optional)..... ► **52.91**

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 166 OF 220
(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. RICHARD J SMITH Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 597 TREETOP LANE
 City State Zip Code
 GURNEE IL 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-PRD-Product Vice Presi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 456.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007129
 Amount of Each Receipt this Period
 23.10

B. RICHARD J SMITH Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 597 TREETOP LANE
 City State Zip Code
 GURNEE IL 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-PRD-Product Vice Presi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 479.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115668
 Amount of Each Receipt this Period
 23.10

C. STEVEN P SORENSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 20712 High Ridge Dr
 City State Zip Code
 KILDEER IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company EVP-PRD-Product Operation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1813.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007113
 Amount of Each Receipt this Period
 91.19

SUBTOTAL of Receipts This Page (optional)..... ▶ 137.39
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 167 OF 220
(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. STEVEN P SORENSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 20712 High Ridge Dr
 City State Zip Code
 KILDEER IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company EVP-PRD-Product Operation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1904.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115652
 Amount of Each Receipt this Period
 91.19

B. KEVIN A SPATARO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1663 SARATOGA LANE
 City State Zip Code
 GLENVIEW IL 60026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-FSS-Accounting Resear
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 768.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007080
 Amount of Each Receipt this Period
 38.67

C. KEVIN A SPATARO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1663 SARATOGA LANE
 City State Zip Code
 GLENVIEW IL 60026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-FSS-Accounting Resear
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 806.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115620
 Amount of Each Receipt this Period
 38.67

SUBTOTAL of Receipts This Page (optional)..... ▶ 168.53
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 220
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	<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. EDWIN M SPECHT
Full Name (Last, First, Middle Initial)

Mailing Address 740 AMBRIA DRIVE

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

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

Name of Employer Allstate Insurance Company	Occupation HR-Sales Comp-Director
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **806.60**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006941

Amount of Each Receipt this Period

40.42

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

Mailing Address 740 AMBRIA DRIVE

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

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

Name of Employer Allstate Insurance Company	Occupation HR-Sales Comp-Director
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **847.02**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115483

Amount of Each Receipt this Period

40.42

C. BRIAN M SPENCE
Full Name (Last, First, Middle Initial)

Mailing Address 1001 N Vermont St

City Arlington	State VA	Zip Code 22201
-------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Controller
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **572.60**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007098

Amount of Each Receipt this Period

28.88

SUBTOTAL of Receipts This Page (optional).....▶	109.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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. BRIAN M SPENCE

Mailing Address 1001 N Vermont St

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
Allstate Insurance Company Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
601.48

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115638

Amount of Each Receipt this Period
28.88

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

Mailing Address 20 LAKESIDE LANE

City State Zip Code
N. BARRINGTON IL 60010

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

Name of Employer Occupation
Allstate Insurance Company VP-LGL-Specialty Operatio

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
583.47

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007075

Amount of Each Receipt this Period
29.27

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

Mailing Address 20 LAKESIDE LANE

City State Zip Code
N. BARRINGTON IL 60010

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

Name of Employer Occupation
Allstate Insurance Company VP-LGL-Specialty Operatio

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
612.74

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115615

Amount of Each Receipt this Period
29.27

SUBTOTAL of Receipts This Page (optional)..... ▶ 87.42

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 220
	<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-AF-Technology
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1199.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006976

Amount of Each Receipt this Period
60.48

B. 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-AF-Technology
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1259.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115518

Amount of Each Receipt this Period
60.48

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 Corporate Counsel
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
871.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006964

Amount of Each Receipt this Period
43.77

SUBTOTAL of Receipts This Page (optional).....	▶	164.73
TOTAL This Period (last page this line number only).....	▶	

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

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

FOR LINE NUMBER: PAGE 171 OF 220
(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. GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City ATLANTIC BEACH State FL Zip Code 32233

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **915.30**

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115506

Amount of Each Receipt this Period
43.77

Full Name (Last, First, Middle Initial)
B. MYRON E STOUFFER

Mailing Address P.O. Box 533

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation SVP-AHA-Independent Chann

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **607.77**

Date of Receipt
10 / 04 / 2013
Transaction ID : A2013-4006960

Amount of Each Receipt this Period
30.78

Full Name (Last, First, Middle Initial)
C. MYRON E STOUFFER

Mailing Address P.O. Box 533

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation SVP-AHA-Independent Chann

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **638.55**

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115502

Amount of Each Receipt this Period
30.78

SUBTOTAL of Receipts This Page (optional)..... ► **105.33**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 220
	<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 J SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 4018 BERRYWOOD DRIVE

City SEAFORD	State NY	Zip Code 11783
-----------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation FSL - Growth
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006916

Amount of Each Receipt this Period
13.87

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

Mailing Address 4018 BERRYWOOD DRIVE

City SEAFORD	State NY	Zip Code 11783
-----------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation FSL - Growth
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
289.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115458

Amount of Each Receipt this Period
13.87

C. KATHLEEN A SWAIN
Full Name (Last, First, Middle Initial)

Mailing Address 242 HIGHVIEW

City ELMHURST	State IL	Zip Code 60126
------------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation SVP-FSS-Internal Auditing
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006991

Amount of Each Receipt this Period
62.92

SUBTOTAL of Receipts This Page (optional).....▶	90.66
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 173 OF 220
(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. KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
 ELMHURST IL 60126

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

Name of Employer Occupation
 Allstate Insurance Company SVP-FSS-Internal Auditing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1313.71

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115533

Amount of Each Receipt this Period
 62.92

Full Name (Last, First, Middle Initial)
B. CARL J TACKETT

Mailing Address 307 WENDRON COURT

City State Zip Code
 FRANKLIN TN 37069

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

Name of Employer Occupation
 Allstate Insurance Company Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 369.37

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006998

Amount of Each Receipt this Period
 20.21

Full Name (Last, First, Middle Initial)
C. CARL J TACKETT

Mailing Address 307 WENDRON COURT

City State Zip Code
 FRANKLIN TN 37069

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

Name of Employer Occupation
 Allstate Insurance Company Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 389.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115540

Amount of Each Receipt this Period
 20.21

SUBTOTAL of Receipts This Page (optional)..... ▶ 103.34

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 174 OF 220
	<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. BENJAMIN A TARVER		Date of Receipt
Mailing Address 2495 EMERALD LANE		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code LINDENHURST IL 60046		Transaction ID : A2013-4006921
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.33"/>
Name of Employer Allstate Insurance Company	Occupation VP-LGL-Investigative Serv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="504.08"/>	

Full Name (Last, First, Middle Initial) B. BENJAMIN A TARVER		Date of Receipt
Mailing Address 2495 EMERALD LANE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code LINDENHURST IL 60046		Transaction ID : A2013-4115463
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.33"/>
Name of Employer Allstate Insurance Company	Occupation VP-LGL-Investigative Serv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="529.41"/>	

Full Name (Last, First, Middle Initial) C. SEAN D THAKUR		Date of Receipt
Mailing Address 701 N. Chruch St #1		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code Charlotte NC 28202		Transaction ID : A2013-4007132
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="19.32"/>
Name of Employer Allstate Insurance Company	Occupation ATO-Leader-Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="383.83"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="69.98"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 175 OF 220
(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. SEAN D THAKUR
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 N. Chruch St #1
 City Charlotte State NC Zip Code 28202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Leader-Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 403.15

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115671
 Amount of Each Receipt this Period
 19.32

B. Joy A Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 2240 Henley Street
 City Glenview State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Finance Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.89

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007186
 Amount of Each Receipt this Period
 14.15

C. Joy A Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 2240 Henley Street
 City Glenview State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Finance Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.04

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115725
 Amount of Each Receipt this Period
 14.15

SUBTOTAL of Receipts This Page (optional)..... ▶ 47.62
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 176 OF 220
(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. MICHAEL A THOMAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 152 Robsart Place
 City State Zip Code
 KENILWORTH IL 60043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-RE-Administration & Re
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 483.63

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007178
 Amount of Each Receipt this Period
 24.35

B. MICHAEL A THOMAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 152 Robsart Place
 City State Zip Code
 KENILWORTH IL 60043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-RE-Administration & Re
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 507.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115717
 Amount of Each Receipt this Period
 24.35

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 Corp Rel Sr Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 660.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007018
 Amount of Each Receipt this Period
 33.24

SUBTOTAL of Receipts This Page (optional)..... ▶ 81.94
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 177 OF 220
(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. 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 Corp Rel Sr Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 693.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115559
 Amount of Each Receipt this Period
 33.24

B. MARK L THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3233 N RACINE #2
 City State Zip Code
 CHICAGO IL 60657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-PRD-Encompass
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 691.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007144
 Amount of Each Receipt this Period
 47.57

C. MARK L THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3233 N RACINE #2
 City State Zip Code
 CHICAGO IL 60657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-PRD-Encompass
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 739.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115683
 Amount of Each Receipt this Period
 47.57

SUBTOTAL of Receipts This Page (optional)..... ▶ 128.38
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 178 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. WILLIAM J THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5129 Pine River Trail
 City State Zip Code
 Castle Rock CO 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-SAL-Field Senior Vice
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1006.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006955
 Amount of Each Receipt this Period
 50.68

B. WILLIAM J THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5129 Pine River Trail
 City State Zip Code
 Castle Rock CO 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-SAL-Field Senior Vice
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1057.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115497
 Amount of Each Receipt this Period
 50.68

C. ROBERT E TRANSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2644 N DOUGLAS
 City State Zip Code
 ARLINGTON HTS IL 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-AF-Life Product
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 628.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007025
 Amount of Each Receipt this Period
 31.49

SUBTOTAL of Receipts This Page (optional)..... ▶ 132.85
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT E TRANSON		Date of Receipt
Mailing Address 2644 N DOUGLAS		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code ARLINGTON HTS IL 60004		Transaction ID : A2013-4115566
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="31.49"/>
Name of Employer Allstate Insurance Company	Occupation VP-AF-Life Product	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="659.89"/>	

Full Name (Last, First, Middle Initial) B. MELINDA S TUNNER		Date of Receipt
Mailing Address 5430 TALL OAKS DRIVE		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code LONG GROVE IL 60047		Transaction ID : A2013-4007128
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="54.51"/>
Name of Employer Allstate Insurance Company	Occupation VP-SAL-Sales Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1084.22"/>	

Full Name (Last, First, Middle Initial) C. MELINDA S TUNNER		Date of Receipt
Mailing Address 5430 TALL OAKS DRIVE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code LONG GROVE IL 60047		Transaction ID : A2013-4115667
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="54.51"/>
Name of Employer Allstate Insurance Company	Occupation VP-SAL-Sales Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1138.73"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.51"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 180 OF 220
(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. RICHARD D TURANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4960 S CHESTER ST
 City State Zip Code
 ENGLEWOOD CO 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 430.71

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006908
 Amount of Each Receipt this Period
 21.70

B. RICHARD D TURANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4960 S CHESTER ST
 City State Zip Code
 ENGLEWOOD CO 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 452.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115450
 Amount of Each Receipt this Period
 21.70

C. THOMAS P TUZAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 443 HUNTINGTON LANE
 City State Zip Code
 ELMHURST IL 60126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Frontline Process Expert
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 227.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007036
 Amount of Each Receipt this Period
 11.44

SUBTOTAL of Receipts This Page (optional)..... ▶ 54.84
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 181 OF 220
(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. THOMAS P TUZAK

Mailing Address 443 HUNTINGTON LANE

City State Zip Code
 ELMHURST IL 60126

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

Name of Employer Occupation
 Allstate Insurance Company Frontline Process Expert

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 238.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115577

Amount of Each Receipt this Period
 11.44

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

Mailing Address 609 S. KENNICOTT AVE

City State Zip Code
 ARLINGTON HTS IL 60005

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 204.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007040

Amount of Each Receipt this Period
 10.26

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

Mailing Address 609 S. KENNICOTT AVE

City State Zip Code
 ARLINGTON HTS IL 60005

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 214.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115581

Amount of Each Receipt this Period
 10.26

SUBTOTAL of Receipts This Page (optional)..... ▶ 31.96

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 182 OF 220
(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. 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-LGL-Government & Indu**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1272.38

Date of Receipt
10 / 04 / 2013
Transaction ID : A2013-4007031

Amount of Each Receipt this Period
63.97

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1336.35

Date of Receipt
10 / 18 / 2013
Transaction ID : A2013-4115572

Amount of Each Receipt this Period
63.97

Full Name (Last, First, Middle Initial)
C. LISA A VAN SCOYOC

Mailing Address **555 PRIMROSE LANE**

City **CRYSTAL LAKE** State **IL** Zip Code **60014**

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

Name of Employer: **Allstate Insurance Company** Occupation: **Sr. Manager Accounting/Fi**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
343.33

Date of Receipt
10 / 04 / 2013
Transaction ID : A2013-4007039

Amount of Each Receipt this Period
17.27

SUBTOTAL of Receipts This Page (optional)..... ► **145.21**

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

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

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

FOR LINE NUMBER: PAGE 183 OF 220
(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. LISA A VAN SCOYOC
 Mailing Address 555 PRIMROSE LANE
 City State Zip Code
 CRYSTAL LAKE IL 60014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Sr. Manager Accounting/Fi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115580
 Amount of Each Receipt this Period
 17.27

Full Name (Last, First, Middle Initial)
B. PATRICIA C VANLAMMEREN
 Mailing Address 2800 Birchwood Avenue
 City State Zip Code
 Wilmette IL 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-AHA-Field Business Co
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1398.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007151
 Amount of Each Receipt this Period
 70.38

Full Name (Last, First, Middle Initial)
C. PATRICIA C VANLAMMEREN
 Mailing Address 2800 Birchwood Avenue
 City State Zip Code
 Wilmette IL 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-AHA-Field Business Co
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1468.71

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115690
 Amount of Each Receipt this Period
 70.38

SUBTOTAL of Receipts This Page (optional)..... ▶ 158.03
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 2514 S WESLEY AVENUE

City BERWYN State IL Zip Code 60402

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **873.93**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4006986

Amount of Each Receipt this Period
43.89

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

Mailing Address 2514 S WESLEY AVENUE

City BERWYN State IL Zip Code 60402

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

Name of Employer Allstate Insurance Company Occupation Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **917.82**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115528

Amount of Each Receipt this Period
43.89

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

Mailing Address 37144 FOX HILL DR

City WADSWORTH State IL Zip Code 60083

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2792.39**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4006917

Amount of Each Receipt this Period
140.38

SUBTOTAL of Receipts This Page (optional)..... **228.16**

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 185 OF 220
(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. STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2932.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115459

Amount of Each Receipt this Period
140.38

Full Name (Last, First, Middle Initial)
B. MICHAEL F VITALE JR Jr.

Mailing Address 1824 Roy Lane

City State Zip Code
Forks Twp. PA 18040

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

Name of Employer Occupation
Allstate Insurance Company Regional Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.03

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006938

Amount of Each Receipt this Period
17.05

Full Name (Last, First, Middle Initial)
C. MICHAEL F VITALE JR Jr.

Mailing Address 1824 Roy Lane

City State Zip Code
Forks Twp. PA 18040

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

Name of Employer Occupation
Allstate Insurance Company Regional Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115480

Amount of Each Receipt this Period
17.05

SUBTOTAL of Receipts This Page (optional)..... ▶ 174.48

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 220
	<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. James M Vogel
Full Name (Last, First, Middle Initial)

Mailing Address 510 Mawman Ave

City Lake Bluff	State IL	Zip Code 60044
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **331.51**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007191

Amount of Each Receipt this Period

16.65

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

Mailing Address 510 Mawman Ave

City Lake Bluff	State IL	Zip Code 60044
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **348.16**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115730

Amount of Each Receipt this Period

16.65

C. EDWIN L WASINGER JR Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 6245 MURIFIELD DRIVE

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

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

Name of Employer Allstate Insurance Company	Occupation AHA-Strategic Operations-
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **407.04**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007085

Amount of Each Receipt this Period

20.53

SUBTOTAL of Receipts This Page (optional).....▶	53.83
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 187 OF 220
(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. EDWIN L WASINGER JR Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 6245 MURIFIELD DRIVE
 City State Zip Code
 GURNEE IL 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company AHA-Strategic Operations-
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 427.57

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115625
 Amount of Each Receipt this Period
 20.53

B. Robert Wasserman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1N165 Partridge Dr
 City State Zip Code
 Wheaton IL 60188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-MRK-eBusiness & Direc
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1397.14

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007188
 Amount of Each Receipt this Period
 70.28

C. Robert Wasserman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1N165 Partridge Dr
 City State Zip Code
 Wheaton IL 60188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-MRK-eBusiness & Direc
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1467.42

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115727
 Amount of Each Receipt this Period
 70.28

SUBTOTAL of Receipts This Page (optional)..... ▶ 161.09
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 188 OF 220
(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. LEWIS C WEBB II
 Full Name (Last, First, Middle Initial)
 Mailing Address 1444 El Pardo Dr
 City State Zip Code
 Trinity FL 34655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Regional Financial Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007172
 Amount of Each Receipt this Period
 17.54

B. LEWIS C WEBB II
 Full Name (Last, First, Middle Initial)
 Mailing Address 1444 El Pardo Dr
 City State Zip Code
 Trinity FL 34655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Regional Financial Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115711
 Amount of Each Receipt this Period
 17.54

C. LESLEY R WEBER
 Full Name (Last, First, Middle Initial)
 Mailing Address 230 Riverside Drive
 City State Zip Code
 New York NY 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Senior Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 373.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007106
 Amount of Each Receipt this Period
 33.70

SUBTOTAL of Receipts This Page (optional)..... ▶ 68.78
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 220
	<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. LESLEY R WEBER
Full Name (Last, First, Middle Initial)

Mailing Address 230 Riverside Drive

City New York State NY Zip Code 10025

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

Name of Employer Allstate Insurance Company Occupation Senior Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **407.03**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115646

Amount of Each Receipt this Period
33.70

B. BRET D WEHRLY
Full Name (Last, First, Middle Initial)

Mailing Address 2079 POWHATAN TRAIL

City RICHMOND State KY Zip Code 40475

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

Name of Employer Allstate Insurance Company Occupation FSL - Growth

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **273.43**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013

Transaction ID : A2013-4007150

Amount of Each Receipt this Period
13.73

C. BRET D WEHRLY
Full Name (Last, First, Middle Initial)

Mailing Address 2079 POWHATAN TRAIL

City RICHMOND State KY Zip Code 40475

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

Name of Employer Allstate Insurance Company Occupation FSL - Growth

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **287.16**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : A2013-4115689

Amount of Each Receipt this Period
13.73

SUBTOTAL of Receipts This Page (optional).....▶	61.16
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 190 OF 220
(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. JEROME WHITE
 Mailing Address 5081 OVERLOOK DR.
 City State Zip Code
 ROSWELL GA 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Sales Support Leader
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 232.57

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006925
 Amount of Each Receipt this Period
 11.68

Full Name (Last, First, Middle Initial)
B. JEROME WHITE
 Mailing Address 5081 OVERLOOK DR.
 City State Zip Code
 ROSWELL GA 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Sales Support Leader
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 244.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115467
 Amount of Each Receipt this Period
 11.68

Full Name (Last, First, Middle Initial)
C. SAMUEL W WHITEMAN
 Mailing Address 47 Park View Ln
 City State Zip Code
 Hawthorn Woods IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Claim Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 725.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007135
 Amount of Each Receipt this Period
 36.43

SUBTOTAL of Receipts This Page (optional)..... ▶ 59.79
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 191 OF 220
(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. SAMUEL W WHITEMAN

Mailing Address 47 Park View Ln

City State Zip Code
 Hawthorn Woods IL 60047

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

Name of Employer Occupation
 Allstate Insurance Company Claim Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 761.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115674

Amount of Each Receipt this Period
 36.43

Full Name (Last, First, Middle Initial)
B. CYNTHIA A 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-SAL-Field Senior Vice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 481.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006920

Amount of Each Receipt this Period
 24.81

Full Name (Last, First, Middle Initial)
C. CYNTHIA A 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-SAL-Field Senior Vice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 505.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115462

Amount of Each Receipt this Period
 24.81

SUBTOTAL of Receipts This Page (optional)..... ▶ 86.05

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

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

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

FOR LINE NUMBER: PAGE 192 OF 220
(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. GENE T WHOLF
 Mailing Address 115 MOHAWK TRAIL
 City State Zip Code
 LAKE ZURICH IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Frontline Performance Lea
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 254.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007157
 Amount of Each Receipt this Period
 12.70

Full Name (Last, First, Middle Initial)
B. GENE T WHOLF
 Mailing Address 115 MOHAWK TRAIL
 City State Zip Code
 LAKE ZURICH IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Frontline Performance Lea
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 266.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115696
 Amount of Each Receipt this Period
 12.70

Full Name (Last, First, Middle Initial)
C. ROBERT N WHOLF
 Mailing Address 115 B Mohawk Trail
 City State Zip Code
 LAKE ZURICH IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Emerging Business Operati
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 465.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006975
 Amount of Each Receipt this Period
 23.36

SUBTOTAL of Receipts This Page (optional)..... ▶ 48.76
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 193 OF 220
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT N WHOLF		Date of Receipt
Mailing Address 115 B Mohawk Trail		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City LAKE ZURICH State IL Zip Code 60047		Transaction ID : A2013-4115517
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Allstate Insurance Company Occupation Emerging Business Operati		<input type="text" value="23.36"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="488.40"/>	

Full Name (Last, First, Middle Initial) B. JOHN K WILCOX		Date of Receipt
Mailing Address 1120 JESSICA LANE		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City LIBERTYVILLE State IL Zip Code 60048		Transaction ID : A2013-4007000
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Allstate Insurance Company Occupation Risk Mgmt-NCS Product Sr.		<input type="text" value="42.69"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="848.63"/>	

Full Name (Last, First, Middle Initial) C. JOHN K WILCOX		Date of Receipt
Mailing Address 1120 JESSICA LANE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City LIBERTYVILLE State IL Zip Code 60048		Transaction ID : A2013-4115542
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Allstate Insurance Company Occupation Risk Mgmt-NCS Product Sr.		<input type="text" value="42.69"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="891.32"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="108.74"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 220
	<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. JAMES L WILLCOX
Full Name (Last, First, Middle Initial)

Mailing Address 1562 Sienna Oak Court

City Sandy	State UT	Zip Code 84092
---------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Market Claim Manager
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **526.98**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4006957

Amount of Each Receipt this Period

26.50

B. JAMES L WILLCOX
Full Name (Last, First, Middle Initial)

Mailing Address 1562 Sienna Oak Court

City Sandy	State UT	Zip Code 84092
---------------	-------------	-------------------

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

Name of Employer Allstate Insurance Company	Occupation Market Claim Manager
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **553.48**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115499

Amount of Each Receipt this Period

26.50

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

Mailing Address 7104 CHARDON COURT

City CLARKSVILLE	State MD	Zip Code 21029
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **891.15**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007019

Amount of Each Receipt this Period

44.85

SUBTOTAL of Receipts This Page (optional).....▶	97.85
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 195 OF 220
(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. JEFFREY W WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7104 CHARDON COURT
 City State Zip Code
 CLARKSVILLE MD 21029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 936.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115560
 Amount of Each Receipt this Period
 44.85

B. THOMAS J WILSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2024 N. MOHAWK
 City State Zip Code
 CHICAGO IL 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007108
 Amount of Each Receipt this Period
 176.85

C. KURT L WINTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1403 N. WALNUT
 City State Zip Code
 ARLINGTON HGHTS IL 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company VP-MRK-Regional Marketing
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 426.39

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007173
 Amount of Each Receipt this Period
 21.47

SUBTOTAL of Receipts This Page (optional)..... ▶ 243.17
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 196 OF 220
(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. KURT L WINTER

Mailing Address 1403 N. WALNUT

City State Zip Code
 ARLINGTON HGHTS IL 60004

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

Name of Employer Occupation
 Allstate Insurance Company VP-MRK-Regional Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 447.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115712

Amount of Each Receipt this Period
 21.47

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

Mailing Address 70 Ferncliff Drive

City State Zip Code
 West Hartford CT 06117

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3608.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007194

Amount of Each Receipt this Period
 173.08

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

Mailing Address 70 Ferncliff Drive

City State Zip Code
 West Hartford CT 06117

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3781.78

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115733

Amount of Each Receipt this Period
 173.08

SUBTOTAL of Receipts This Page (optional)..... ▶ 367.63

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 220
	<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. RONALD W WINTER
Full Name (Last, First, Middle Initial)
Mailing Address 2908 GREY HERON CT.
City JOHNSBURG State IL Zip Code 60051
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation ATO-Leader-Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 413.45

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007079
Amount of Each Receipt this Period
20.81

B. RONALD W WINTER
Full Name (Last, First, Middle Initial)
Mailing Address 2908 GREY HERON CT.
City JOHNSBURG State IL Zip Code 60051
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation ATO-Leader-Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 434.26

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115619
Amount of Each Receipt this Period
20.81

C. RICHARD R WISNIEWSKI
Full Name (Last, First, Middle Initial)
Mailing Address 1233 BEDFORD
City PALATINE State IL Zip Code 60067
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior State Filing Manag
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 347.47

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007013
Amount of Each Receipt this Period
17.45

SUBTOTAL of Receipts This Page (optional)..... ▶ 59.07
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 198 OF 220
(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. RICHARD R WISNIEWSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1233 BEDFORD
 City PALATINE State IL Zip Code 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior State Filing Manag
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.92

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115555
 Amount of Each Receipt this Period
 17.45

B. BRUCE A WOIKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1318 N. CHESTNUT AVE.
 City ARLINGTON HTS. State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Accounting Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 448.43

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007076
 Amount of Each Receipt this Period
 22.50

C. BRUCE A WOIKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1318 N. CHESTNUT AVE.
 City ARLINGTON HTS. State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Accounting Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.93

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115616
 Amount of Each Receipt this Period
 22.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 62.45
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 199 OF 220
(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. ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City State Zip Code
Ivanhoe IL 60060

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

Name of Employer Occupation
Allstate Insurance Company Claims Field Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
808.28

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007136

Amount of Each Receipt this Period
40.70

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

Mailing Address 28616 Sky Crest Dr

City State Zip Code
Ivanhoe IL 60060

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

Name of Employer Occupation
Allstate Insurance Company Claims Field Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
848.98

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115675

Amount of Each Receipt this Period
40.70

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

Mailing Address 7 WELLESLEY COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Operations Department Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
348.43

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4006919

Amount of Each Receipt this Period
17.48

SUBTOTAL of Receipts This Page (optional)..... ▶ 98.88

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 220
	<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 WOJTASZEK
Full Name (Last, First, Middle Initial)

Mailing Address 7 WELLESLEY COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Operations Department Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.91

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115461

Amount of Each Receipt this Period
17.48

B. DAVID E WOOLWINE
Full Name (Last, First, Middle Initial)

Mailing Address 1608 W. ROSEHILL DR

City State Zip Code
CHICAGO IL 60660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Allstate Insurance Company Corp Rel Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
423.43

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4006949

Amount of Each Receipt this Period
20.35

C. DAVID E WOOLWINE
Full Name (Last, First, Middle Initial)

Mailing Address 1608 W. ROSEHILL DR

City State Zip Code
CHICAGO IL 60660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Allstate Insurance Company Corp Rel Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
443.78

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115491

Amount of Each Receipt this Period
20.35

SUBTOTAL of Receipts This Page (optional)..... ▶ 58.18

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 201 OF 220
(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. DONALD F WYATT JR Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 811 DRESSER DR.
 City MT PROSPECT State IL Zip Code 60056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Manager-Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 762.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007003
 Amount of Each Receipt this Period
 38.10

B. DONALD F WYATT JR Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 811 DRESSER DR.
 City MT PROSPECT State IL Zip Code 60056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation ATO-Manager-Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.10

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115545
 Amount of Each Receipt this Period
 38.10

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-AP-Chief Data Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1234.86

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007049
 Amount of Each Receipt this Period
 62.31

SUBTOTAL of Receipts This Page (optional)..... ▶ 138.51
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 220
	<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. FLOYD M YAGER		Date of Receipt
Mailing Address 1610 BIRCH LANE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code PARK RIDGE IL 60068		Transaction ID : A2013-411590
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="62.31"/>
Name of Employer Allstate Insurance Company	Occupation SVP-AP-Chief Data Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1297.17"/>	

Full Name (Last, First, Middle Initial) B. LORI J YELVINGTON		Date of Receipt
Mailing Address 1531 N HIGHLAND AVE		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code ARLINGTON HGTS. IL 60004		Transaction ID : A2013-4007054
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="114.59"/>
Name of Employer Allstate Insurance Company	Occupation SVP-PF-Regional Chief Fin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1266.70"/>	

Full Name (Last, First, Middle Initial) C. PHILLIP C YOUNG		Date of Receipt
Mailing Address 2181 APPLE HILL LANE		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City State Zip Code BUFFALO GROVE IL 60089		Transaction ID : A2013-4007021
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="21.79"/>
Name of Employer Allstate Insurance Company	Occupation Director of Flight Operat	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="433.91"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="198.69"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 220
	<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. PHILLIP C YOUNG
Full Name (Last, First, Middle Initial)
Mailing Address 2181 APPLE HILL LANE

City BUFFALO GROVE	State IL	Zip Code 60089
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Allstate Insurance Company	Occupation Director of Flight Operat
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.70**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115562

Amount of Each Receipt this Period

42.77

B. MARY E ZAGORSKI
Full Name (Last, First, Middle Initial)
Mailing Address 2609 N PINE AVE

City ARLINGTON HEIGHTS	State IL	Zip Code 60004
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Allstate Insurance Company	Occupation PMO Director
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **853.01**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

Transaction ID : A2013-4007046

Amount of Each Receipt this Period

42.77

C. MARY E ZAGORSKI
Full Name (Last, First, Middle Initial)
Mailing Address 2609 N PINE AVE

City ARLINGTON HEIGHTS	State IL	Zip Code 60004
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Allstate Insurance Company	Occupation PMO Director
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **895.78**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

Transaction ID : A2013-4115587

Amount of Each Receipt this Period

42.77

SUBTOTAL of Receipts This Page (optional).....▶	107.33
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 220
	<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. PAUL K ZIGTERMAN
Full Name (Last, First, Middle Initial)

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
VILLA PARK IL 60181

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.45

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007094

Amount of Each Receipt this Period
21.16

B. PAUL K ZIGTERMAN
Full Name (Last, First, Middle Initial)

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
VILLA PARK IL 60181

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
441.61

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013
Transaction ID : A2013-4115634

Amount of Each Receipt this Period
21.16

C. GERALD L ZIMMERMAN JR
Full Name (Last, First, Middle Initial)

Mailing Address 2584 Sutton Lane

City State Zip Code
AURORA IL 60502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Allstate Insurance Company Corporate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1486.25

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2013
Transaction ID : A2013-4007117

Amount of Each Receipt this Period
74.56

SUBTOTAL of Receipts This Page (optional)..... ▶ 116.88

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 205 OF 220
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. GERALD L ZIMMERMAN JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2584 Sutton Lane
 City State Zip Code
 AURORA IL 60502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company Corporate Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1560.81

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115656
 Amount of Each Receipt this Period
 74.56

B. CARLA A ZUNIGA
 Full Name (Last, First, Middle Initial)
 Mailing Address 2189 N. BEAVER CREEK DRIVE
 City State Zip Code
 VERNON HILLS IL 60061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-ATO-Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 717.52

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : A2013-4007154
 Amount of Each Receipt this Period
 47.35

C. CARLA A ZUNIGA
 Full Name (Last, First, Middle Initial)
 Mailing Address 2189 N. BEAVER CREEK DRIVE
 City State Zip Code
 VERNON HILLS IL 60061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Allstate Insurance Company SVP-ATO-Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 764.87

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : A2013-4115693
 Amount of Each Receipt this Period
 47.35

SUBTOTAL of Receipts This Page (optional).....▶	169.26
TOTAL This Period (last page this line number only).....▶	21199.23

**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
Service Charge

Category/
Type

Candidate Name

Office Sought: House Senate President
State: IL District:

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

/ /

Transaction ID : B481225

Amount of Each Disbursement this Period

Service Charge

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Kinzinger for Congress

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Contribution

011

Candidate Name
Adam Kinzinger

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 16

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	1	3

Transaction ID : B474911

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Roskam for Congress

Mailing Address P.O. Box 713

City Wheaton State IL Zip Code 60189

Purpose of Disbursement
Contribution

011

Candidate Name
Peter J Roskam

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	1	3

Transaction ID : B474909

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Schneider for Congress

Mailing Address 3701 Porter Street NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Contribution

011

Candidate Name
Brad Schneider

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 10

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	1	3

Transaction ID : B475390

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

2	5	0	0	0	0	0	0	0	0

TOTAL This Period (last page this line number only)..... ▶

2	5	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Upton for All of Us

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement Contribution

011

Candidate Name

Frederick S Upton

Category/Type

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: MI District: 06

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2013

Transaction ID : B475388

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Empire PAC

Mailing Address 236 Massachusetts Ave. NE #110

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

Office Sought: House Senate President

Disbursement For: 2013 Primary General Other (specify) ▼ Not Applicable

State: NY District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2013

Transaction ID : B475389

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Bob Casey for Senate

Mailing Address 117 E Street SE Unit B

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Candidate Name

Bob Casey Jr.

Category/Type

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2013

Transaction ID : B474910

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Bob Goodlatte for Congress

Mailing Address P.O. Box 3591

City Alexandria State VA Zip Code 22302

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Bob Goodlatte

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 09 / 2013

Transaction ID : B475419

Amount of Each Disbursement this Period

1000.00

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

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

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

6500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Rich Golick Campaign Committee

Mailing Address 2372 Simpson Farm Way

City State Zip Code
Smyrna GA 30080

Purpose of Disbursement
P-2014 State House 40 GA

011

Candidate Name
Rich Golick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2013

Transaction ID : **B474912**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Rich Golick Campaign Committee

Mailing Address 2372 Simpson Farm Way

City State Zip Code
Smyrna GA 30080

Purpose of Disbursement
G-2014 State House 40 GA

011

Candidate Name
Rich Golick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2013

Transaction ID : **B475393**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends of Don Harmon

Mailing Address 1243 Woodbine Suite 102

City State Zip Code
Oak Park IL 60302

Purpose of Disbursement
P-2014 State Senate 39 IL

011

Candidate Name
Don Harmon

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2013

Transaction ID : **B475394**

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

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. Liz Bangerter for HD 80

Mailing Address 3419 Blackhawk Street

City Helena State MT Zip Code 59602

Purpose of Disbursement
P-2014 State House 80 MT

011

Candidate Name

Liz Bangerter

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2013

Transaction ID : B474945

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Tom Berry for Montana

Mailing Address P.O. Box 157

City Roundup State MT Zip Code 59072

Purpose of Disbursement
P-2014 State House 45 MT

011

Candidate Name

Thomas D Berry

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2013

Transaction ID : B474943

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

C. Ed Buttrey Campaign

Mailing Address 27 Granite Hill Lane

City Great Falls State MT Zip Code 59405

Purpose of Disbursement
P-2014 State Senate 11 MT

011

Candidate Name

Ed Buttrey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2013

Transaction ID : B474942

Amount of Each Disbursement this Period

160.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

470.00

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. Senator Tom Facey

Mailing Address 418 Plymouth Street

City Missoula State MT Zip Code 59801

Purpose of Disbursement
P-2014 State Senate 48 MT

011

Candidate Name

Thomas Facey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2013

Transaction ID : B474930

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

B. Roger Hagan for House District 19

Mailing Address 117 Gerber Road

City Great Falls State MT Zip Code 59405

Purpose of Disbursement
P-2014 State House 19 MT

011

Candidate Name

Roger Hagan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2013

Transaction ID : B474953

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

C. Campaign to Elect Scott Sales

Mailing Address 5200 Bostwick Road

City Bozeman State MT Zip Code 59715

Purpose of Disbursement
P-2016 State Senate 34 MT

011

Candidate Name

Scott Sales

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2013

Transaction ID : B474952

Amount of Each Disbursement this Period

160.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

480.00

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. Thomas for Senate

Mailing Address 1004 South Burnt Fork Road

City State Zip Code
Stevensville MT 59870

Purpose of Disbursement
P-2016 State Senate 45 MT

011

Candidate Name

Fred Thomas

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2013

Transaction ID : B474948

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

B. Kirk Wagoner for HD 77

Mailing Address 4 Mission Mountain Road

City State Zip Code
Montana City MT 59634

Purpose of Disbursement
P-2014 State House 77 MT

011

Candidate Name

Kirk B Wagoner

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2013

Transaction ID : B474947

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

C. Friends of Dominic Pileggi

Mailing Address 323 West Front Street

City State Zip Code
Media PA 19063

Purpose of Disbursement
P-2016 State Senate 09 PA

011

Candidate Name

Dominic F Pileggi

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2013

Transaction ID : B474913

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

1310.00

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. Ryan Guillen Campaign

Mailing Address 2504 Sable Palm Drive

City State Zip Code
Rio Grande City TX 78582

Purpose of Disbursement
P-2014 State House 31 TX

011

Candidate Name
Ryan Guillen

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2013

Transaction ID : B480549

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Texans for Kelly Hancock

Mailing Address PO Box 821349

City State Zip Code
North Richland Hills TX 76182

Purpose of Disbursement
P-2014 State Senate 09 TX

011

Candidate Name
Kelly Hancock

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2013

Transaction ID : B480551

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Friends of Larry Taylor

Mailing Address PO Box 1208

City State Zip Code
Friendswood TX 77549

Purpose of Disbursement
P-2016 State Senate 11 TX

011

Candidate Name
Larry Taylor

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2013

Transaction ID : B480550

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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. David Albo for Delegate

Mailing Address 6367 Rolling Mill Pl. Suite 102

City Springfield State VA Zip Code 22152

Purpose of Disbursement
G-2013 State House 42 VA

011

Candidate Name

David Barr Albo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2013			

Transaction ID : B475296

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Friends of Kirk Cox

Mailing Address 131 Old Brickhouse Lane

City Colonial Heights State VA Zip Code 23834

Purpose of Disbursement
G-2013 State House 66 VA

011

Candidate Name

Kirk Cox

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2013			

Transaction ID : B475285

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Gilbert for Delegate

Mailing Address Post Office Box 309

City Woodstock State VA Zip Code 22664

Purpose of Disbursement
G-2013 State House 15 VA

011

Candidate Name

Christopher T Gilbert

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2013			

Transaction ID : B475282

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

1250.00

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Tim Hugo

Mailing Address P.O. Box 893

City State Zip Code
Centreville VA 20122

Purpose of Disbursement
G-2013 State House 40 VA

011

Candidate Name

Tim D. Hugo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2013

Transaction ID : B475284

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Kilgore for Delegate

Mailing Address P.O. Box 669

City State Zip Code
Gate City VA 24251

Purpose of Disbursement
G-2013 State House 01 VA

011

Candidate Name

Terry G. Kilgore

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2013

Transaction ID : B475277

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Lewis for House of Delegates

Mailing Address PO Box 760

City State Zip Code
Accomac VA 23301

Purpose of Disbursement
G-2013 State House 100 VA

011

Candidate Name

Lynwood W Lewis Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2013

Transaction ID : B475278

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

1750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Jackson Miller

Mailing Address P.O. Box 10072

City Manassas State VA Zip Code 20108

Purpose of Disbursement
G-2013 State House 50 VA

011

Candidate Name

Jackson H Miller

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2013

Transaction ID : B475295

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Mike Watson

Mailing Address Post Office Box 6628

City Williamsburg State VA Zip Code 23188

Purpose of Disbursement
G-2013 State Delegate 93 VA

011

Candidate Name

Mike Watson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2013

Transaction ID : B475293

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Ken Cuccinelli for Governor

Mailing Address PO Box 6407

City Springfield State VA Zip Code 22150

Purpose of Disbursement
G-2013 Governor VA

011

Candidate Name

Ken Cuccinelli

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2013

Transaction ID : B480529

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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. Howell for Senate

Mailing Address P.O. Box 2608

City Reston State VA Zip Code 20195

Purpose of Disbursement
P-2015 State Senate 32 VA

011

Candidate Name
Janet Howell

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2013

Transaction ID : **B480619**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. McDougle for Virginia

Mailing Address P.O. Box 187

City Mechanicsville State VA Zip Code 23111

Purpose of Disbursement
P-2015 State Senate 4 VA

011

Candidate Name
Ryan McDougle

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2013

Transaction ID : **B480607**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Steve Newman

Mailing Address P.O. Box 480

City Forest State VA Zip Code 24551

Purpose of Disbursement
P-2015 State Senate 23 VA

011

Candidate Name
Stephen D Newman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2013

Transaction ID : **B480621**

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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 Tommy Norment

Mailing Address P.O. Box 6205

City Williamsburg State VA Zip Code 23188

Purpose of Disbursement
P-2015 State Senate 03 VA

011

Candidate Name

Thomas K Norment

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2013

Transaction ID : **B480620**

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

B. Puckett for Senate

Mailing Address PO Box 924

City Tazewell State VA Zip Code 24651

Purpose of Disbursement
P-2015 State Senate 38 VA

011

Candidate Name

Phillip P Puckett

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2013

Transaction ID : **B480609**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Saslaw for Senate

Mailing Address Post Office Box 1856

City Springfield State VA Zip Code 22151

Purpose of Disbursement
P-2015 State Senate 35 VA

011

Candidate Name

Richard L Saslaw

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2013

Transaction ID : **B480604**

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Stosch for Senate

Mailing Address 4551 Cox Rd Suite 110

City State Zip Code
Glen Allen VA 23060

Purpose of Disbursement
P-2015 State Senate 12 VA

011

Candidate Name

Walter A Stosch

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 31 / 2013

Transaction ID : B480602

Amount of Each Disbursement this Period

500.00

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

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

SUBTOTAL of Disbursements This Page (optional)..... ▶

500.00

TOTAL This Period (last page this line number only)..... ▶

25510.00