

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 03 01 2008 through 03 31 2008

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

Type or Print Name of Treasurer Steven C. Verney

Signature of Treasurer Electronically Filed by Steven C. Verney Date 04 11 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		118846.25
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	142388.35									
(c) Total Receipts (from Line 19)	28692.85	98036.77								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	171081.20	216883.02								
7. Total Disbursements (from Line 31)	49708.05	95509.87								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	121373.15	121373.15								
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**

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	18445.35	33287.72
(i) Itemized (use Schedule A)		
(ii) Unitemized	10246.96	64244.28
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	28692.31	97532.00
(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) ▶	28692.31	97532.00
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.)	0.54	4.77
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	28692.85	98036.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28692.85	98036.77

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	208.05	509.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	208.05	509.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18000.00	59500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	31500.00	35500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	49708.05	95509.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49708.05	95509.87

DETAILED SUMMARY PAGE
of Disbursements

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)	28692.31	97532.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28692.31	97532.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	208.05	509.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	208.05	9.87

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 142
(check only one)

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
JONES G ADUKEH

Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
LAKE VILLA IL 60046

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 ▼ 223.51

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538415

Amount of Each Receipt this Period
32.38

B.

Full Name (Last, First, Middle Initial)
LORAL ADUKEH

Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
LAKE VILLA IL 60046

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.85

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538475

Amount of Each Receipt this Period
32.55

C.

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

Mailing Address 438 MITCHELL DRIVE

City State Zip Code
GRAYS LAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation VP Enterprise Infrastruct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 409.43

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473057

Amount of Each Receipt this Period
70.78

SUBTOTAL of Receipts This Page (optional) ► **135.71**

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: (check only one)	PAGE 7 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JOHN P BADER	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 438 MITCHELL DRIVE	Transaction ID: A2008-538096
	City State Zip Code GRAYS LAKE IL 60030	Amount of Each Receipt this Period 70.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP Enterprise Infrastruct Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.21	

B.	Full Name (Last, First, Middle Initial) CHARLES C BAGGS	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 4435 SWILCAN BRIDGE LANE N	Transaction ID: A2008-538187
	City State Zip Code JACKSONVILLE FL 32224	Amount of Each Receipt this Period 31.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP-Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 216.31	

C.	Full Name (Last, First, Middle Initial) DIANE G BAKER	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 120 EAST SHERIDAN RD	Transaction ID: A2008-538183
	City State Zip Code LAKE BLUFF IL 60044	Amount of Each Receipt this Period 51.59
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP-PRODUCT OPS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 299.64	

SUBTOTAL of Receipts This Page (optional)	154.15
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 8 / 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) WILLIAM P BALLINGER	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 47530 ABERDEEN DR	Transaction ID: A2008-473124
	City State Zip Code NOVI MI 48374	Amount of Each Receipt this Period 34.99
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation FVP President New Jersey Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.59

B.	Full Name (Last, First, Middle Initial) WILLIAM P BALLINGER	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 47530 ABERDEEN DR	Transaction ID: A2008-538162
	City State Zip Code NOVI MI 48374	Amount of Each Receipt this Period 34.99
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation FVP President New Jersey Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.58

C.	Full Name (Last, First, Middle Initial) ROBERT H BARGE III	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 2222 LOCH WAY	Transaction ID: A2008-473450
	City State Zip Code EL DORADO HILLS CA 95762	Amount of Each Receipt this Period 68.44
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Field Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 394.34

SUBTOTAL of Receipts This Page (optional)	▶	138.42
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 9 / 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) ROBERT H BARGE III	Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2008
	Mailing Address 2222 LOCH WAY	Transaction ID: A2008-538488
	City State Zip Code EL DORADO HILLS CA 95762	Amount of Each Receipt this Period 68.44
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Field Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 462.78	

B.	Full Name (Last, First, Middle Initial) WALTER A BERKOWICZ	Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2008
	Mailing Address 405 GATESHEAD DRIVE	Transaction ID: A2008-538347
	City State Zip Code NAPERVILLE IL 60565	Amount of Each Receipt this Period 32.68
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 224.16	

C.	Full Name (Last, First, Middle Initial) EDWARD A BIEMER	Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2008
	Mailing Address 807 Greenwood Ave.	Transaction ID: A2008-473095
	City State Zip Code GLENCOE IL 60022	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP and President Broker D Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.20	

SUBTOTAL of Receipts This Page (optional)	▶	141.12
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 10 / 142
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
GLENCOE IL 60022

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

Name of Employer Allstate Insurance Company Occupation VP and President Broker D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.20

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538133

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City State Zip Code
PONTE VEDRA BEA FL 32082

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

Name of Employer Allstate Insurance Company Occupation President-Allstate Workpl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.36

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473380

Amount of Each Receipt this Period
39.36

C.

Full Name (Last, First, Middle Initial)
DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City State Zip Code
PONTE VEDRA BEA FL 32082

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

Name of Employer Allstate Insurance Company Occupation President-Allstate Workpl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.72

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538418

Amount of Each Receipt this Period
39.36

SUBTOTAL of Receipts This Page (optional) ► 118.72

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 11 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) ROBERT L BLOCK	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 398 Brookmont Lane	Transaction ID: A2008-473366
	City State Zip Code North Barrington IL 60010	Amount of Each Receipt this Period 61.41
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Investor R Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 359.51	

B.	Full Name (Last, First, Middle Initial) ROBERT L BLOCK	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 398 Brookmont Lane	Transaction ID: A2008-538404
	City State Zip Code North Barrington IL 60010	Amount of Each Receipt this Period 61.41
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Investor R Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.92	

C.	Full Name (Last, First, Middle Initial) CHARLES A BOLLINGER	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 509 GATES HEAD SOUTH	Transaction ID: A2008-473188
	City State Zip Code ELK GROVE VLLGE IL 60007	Amount of Each Receipt this Period 50.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Sales Agen Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 292.60	

SUBTOTAL of Receipts This Page (optional)	▶	173.12
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 12 / 142
(check only one)

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

A. Full Name (Last, First, Middle Initial)
CHARLES A BOLLINGER

Mailing Address 509 GATES HEAD SOUTH

City State Zip Code
ELK GROVE VLLGE IL 60007

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

Name of Employer Allstate Insurance Company Occupation Vice President Sales Agen

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.90

Date of Receipt: 03 / 28 / 2008
Transaction ID: A2008-538227
Amount of Each Receipt this Period: 50.30

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

Mailing Address 5550 Maybeck Ln

City State Zip Code
Livermore CA 94550

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.32

Date of Receipt: 03 / 28 / 2008
Transaction ID: A2008-538485
Amount of Each Receipt this Period: 33.76

C. Full Name (Last, First, Middle Initial)
MICHAEL B BOYLE

Mailing Address 1063 CHERRY STREET

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Allstate Insurance Company Occupation Vice President Info Techn

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 445.37

Date of Receipt: 03 / 14 / 2008
Transaction ID: A2008-473128
Amount of Each Receipt this Period: 75.77

SUBTOTAL of Receipts This Page (optional) ► 159.83

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 13 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL B BOYLE

Mailing Address 1063 CHERRY STREET

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Allstate Insurance Company Occupation Vice President Info Techn

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 521.14

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538166

Amount of Each Receipt this Period
75.77

B. Full Name (Last, First, Middle Initial)
LONDON B BRADLEY

Mailing Address 1951 BROADSMORE

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.53

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538452

Amount of Each Receipt this Period
30.54

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

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.07

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473246

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional) ► **146.08**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) SHAWN L BROADFIELD		Date of Receipt
	Mailing Address 1044 APPLE BLOSSOM COURT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	LAKE ZURICH	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538284
Name of Employer Allstate Insurance Company		Occupation Finance Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 274.84	<input type="text"/> 39.77

B.	Full Name (Last, First, Middle Initial) DAVID C BROCK		Date of Receipt
	Mailing Address 305 CHURCHILL LANE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 14 / 2008
	City	State	Zip Code
	GURNEE	IL	60031
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-473136
Name of Employer Allstate Insurance Company		Occupation CC IT Senior Planning Con	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.56	<input type="text"/> 35.51

C.	Full Name (Last, First, Middle Initial) DAVID C BROCK		Date of Receipt
	Mailing Address 305 CHURCHILL LANE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	GURNEE	IL	60031
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538174
Name of Employer Allstate Insurance Company		Occupation CC IT Senior Planning Con	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.07	<input type="text"/> 35.51

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 110.79
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 15 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CATHERINE S BRUNE
Mailing Address 190 SAVANNA CT
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP & Chief Information O
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1055.09
Date of Receipt 03 / 14 / 2008
Transaction ID: A2008-473147
Amount of Each Receipt this Period 189.69

B. Full Name (Last, First, Middle Initial)
CATHERINE S BRUNE
Mailing Address 190 SAVANNA CT
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation SVP & Chief Information O
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1232.32
Date of Receipt 03 / 28 / 2008
Transaction ID: A2008-538186
Amount of Each Receipt this Period 177.23

C. Full Name (Last, First, Middle Initial)
ANNE MARIE L BRUNNER
Mailing Address 2514 SOUTH WESLEY AVE
City BERWYN State IL Zip Code 60402
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Home Office Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.34
Date of Receipt 03 / 14 / 2008
Transaction ID: A2008-473242
Amount of Each Receipt this Period 35.59

SUBTOTAL of Receipts This Page (optional) ► 402.51
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 16 / 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) ANNE MARIE L BRUNNER		Date of Receipt
	Mailing Address 2514 SOUTH WESLEY AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	BERWYN	IL	60402
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538280
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 243.93	<input type="text"/> 35.59

B.	Full Name (Last, First, Middle Initial) JOHN C BRUSE		Date of Receipt
	Mailing Address 1434 WOODACRE DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	MC LEAN	VA	22101
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538466
Name of Employer Allstate Insurance Company		Occupation Vice President & Ast Gene	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 213.92	<input type="text"/> 36.36

C.	Full Name (Last, First, Middle Initial) DAVID N BUGGS		Date of Receipt
	Mailing Address 12234 85TH AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	PLEASANT PR	WI	53158
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538405
Name of Employer Allstate Insurance Company		Occupation CC IT Planning Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.98	<input type="text"/> 32.14

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 104.09
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 17 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
KAREN E BURCKHARDT

Mailing Address 730 E. HAWTHORNE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Occupation
Allstate Insurance Company AVP-Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 249.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	8

Transaction ID: A2008-473365

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)
KAREN E BURCKHARDT

Mailing Address 730 E. HAWTHORNE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Occupation
Allstate Insurance Company AVP-Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 292.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	0	8

Transaction ID: A2008-538403

Amount of Each Receipt this Period

42.50

C.

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

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

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

Name of Employer Occupation
Allstate Insurance Company AVP & Tax Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 523.51

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	8

Transaction ID: A2008-473045

Amount of Each Receipt this Period

89.71

SUBTOTAL of Receipts This Page (optional)

174.71

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 18 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

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

Name of Employer Occupation
Allstate Insurance Company AVP & Tax Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 613.22

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538085

Amount of Each Receipt this Period
89.71

B.

Full Name (Last, First, Middle Initial)
D C BUTLER III

Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
ALPHARETTA GA 30004

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

Name of Employer Occupation
Allstate Insurance Company Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 318.49

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473145

Amount of Each Receipt this Period
54.84

C.

Full Name (Last, First, Middle Initial)
D C BUTLER III

Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
ALPHARETTA GA 30004

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

Name of Employer Occupation
Allstate Insurance Company Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 373.33

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538184

Amount of Each Receipt this Period
54.84

SUBTOTAL of Receipts This Page (optional) ▶

199.39

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 19 / 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) DEBORAH K CAMPBELL	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 21863 NORTH TALL OAKS COURT	Transaction ID: A2008-473351
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 62.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Vice President Technology Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 364.57	

B.	Full Name (Last, First, Middle Initial) DEBORAH K CAMPBELL	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 21863 NORTH TALL OAKS COURT	Transaction ID: A2008-538389
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 62.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Vice President Technology Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 427.09	

C.	Full Name (Last, First, Middle Initial) SCOTT M CHRISTENSEN	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 20713 LEXINGTON LANE	Transaction ID: A2008-473299
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 37.99
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Operations Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 224.19	

SUBTOTAL of Receipts This Page (optional)	163.03
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 20 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
SCOTT M CHRISTENSEN

Mailing Address 20713 LEXINGTON LANE

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 262.18

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538337

Amount of Each Receipt this Period

37.99

B.

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

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS IL 60558

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

Name of Employer Allstate Insurance Company Occupation Managing Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.18

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473181

Amount of Each Receipt this Period

34.33

C.

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

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS IL 60558

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

Name of Employer Allstate Insurance Company Occupation Managing Director

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

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538220

Amount of Each Receipt this Period

34.33

SUBTOTAL of Receipts This Page (optional) ▶

106.65

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
Allstate Insurance Company Vice President Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.20

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: A2008-538323

Amount of Each Receipt this Period

33.05

B.

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

Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 274.80

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 0 8

Transaction ID: A2008-473230

Amount of Each Receipt this Period

75.95

C.

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

Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 314.57

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: A2008-538269

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

148.77

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 22 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
MICHAEL P COOGAN

Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

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

Name of Employer Occupation
Allstate Insurance Company CC IT Planning Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 206.95

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538327

Amount of Each Receipt this Period

30.40

B.

Full Name (Last, First, Middle Initial)
RONALD L CORBIN

Mailing Address 14 Portrush Place

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.77

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473390

Amount of Each Receipt this Period

67.52

C.

Full Name (Last, First, Middle Initial)
RONALD L CORBIN

Mailing Address 14 Portrush Place

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 469.29

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538428

Amount of Each Receipt this Period

67.52

SUBTOTAL of Receipts This Page (optional)

165.44

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 23 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) WILLIAM G CRIMMINS		Date of Receipt MM / DD / YYYY 03 / 14 / 2008	
	Mailing Address 218 S KASPAR		Transaction ID: A2008-473189	
	City	State	Zip Code	Amount of Each Receipt this Period
	ARLINGTON HGTS.	IL	60005	73.84
	FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Vice President & Deputy G		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.44		

B.	Full Name (Last, First, Middle Initial) WILLIAM G CRIMMINS		Date of Receipt MM / DD / YYYY 03 / 28 / 2008	
	Mailing Address 218 S KASPAR		Transaction ID: A2008-538228	
	City	State	Zip Code	Amount of Each Receipt this Period
	ARLINGTON HGTS.	IL	60005	73.84
	FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Vice President & Deputy G		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 499.28		

C.	Full Name (Last, First, Middle Initial) FREDERICK F CRIPE		Date of Receipt MM / DD / YYYY 03 / 14 / 2008	
	Mailing Address 277 N. BILTMORE DRIVE		Transaction ID: A2008-473183	
	City	State	Zip Code	Amount of Each Receipt this Period
	N. BARRINGTON	IL	60010	85.62
	FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation GVP-Product Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 489.47		

SUBTOTAL of Receipts This Page (optional)	▶	233.30
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 24 / 142
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
FREDERICK F CRIFE

Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
N. BARRINGTON IL 60010

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

Name of Employer
Allstate Insurance Company

Occupation
GVP-Product Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.09

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538222

Amount of Each Receipt this Period
85.62

B.

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

Mailing Address 14 CARDINAL DRIVE

City State Zip Code
PRINCETON JUNCT NJ 08550

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

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.27

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473107

Amount of Each Receipt this Period
69.12

C.

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

Mailing Address 14 CARDINAL DRIVE

City State Zip Code
PRINCETON JUNCT NJ 08550

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

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.39

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538145

Amount of Each Receipt this Period
69.12

SUBTOTAL of Receipts This Page (optional) ► **223.86**

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 25 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
JOAN M CROCKETT

Mailing Address 27 RIVER BEND CT

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation SVP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 704.28

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473165

Amount of Each Receipt this Period
117.38

B.

Full Name (Last, First, Middle Initial)
JOAN M CROCKETT

Mailing Address 27 RIVER BEND CT

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation SVP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 821.66

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538204

Amount of Each Receipt this Period
117.38

C.

Full Name (Last, First, Middle Initial)
WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Claim Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 243.31

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473094

Amount of Each Receipt this Period
42.56

SUBTOTAL of Receipts This Page (optional) ► 277.32

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 285.87

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538132

Amount of Each Receipt this Period

42.56

B.

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

Mailing Address 1020 Pleasant Street #1

City State Zip Code
Oak Park IL 60302

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

Name of Employer Occupation
Allstate Insurance Company Communication Director

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 208.67

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473135

Amount of Each Receipt this Period

36.32

C.

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

Mailing Address 1020 Pleasant Street #1

City State Zip Code
Oak Park IL 60302

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

Name of Employer Occupation
Allstate Insurance Company Communication Director

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 244.99

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538173

Amount of Each Receipt this Period

36.32

SUBTOTAL of Receipts This Page (optional)

115.20

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) SAM DE FRANK		Date of Receipt
	Mailing Address 5 COURT OF HIDDEN WELLS		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	NORTHBROOK	IL	60062
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538275
Name of Employer Allstate Insurance Company		Occupation AVP & Tax Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 233.64	34.37

B.	Full Name (Last, First, Middle Initial) STEVEN J DEGNAN-SCHMIDT		Date of Receipt
	Mailing Address 1320 MULBERRY LN.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 14 / 2008
	City	State	Zip Code
	CARY	IL	60013
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-473168
Name of Employer Allstate Insurance Company		Occupation Operations Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 213.86	36.61

C.	Full Name (Last, First, Middle Initial) STEVEN J DEGNAN-SCHMIDT		Date of Receipt
	Mailing Address 1320 MULBERRY LN.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	CARY	IL	60013
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538207
Name of Employer Allstate Insurance Company		Occupation Operations Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.47	36.61

SUBTOTAL of Receipts This Page (optional)	107.59
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 28 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JEFFREY F DEIGL	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 453 PRAIRIE	Transaction ID: A2008-473341
	City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 54.05
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Specialty Lines Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.15	

B.	Full Name (Last, First, Middle Initial) JEFFREY F DEIGL	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 453 PRAIRIE	Transaction ID: A2008-538379
	City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 54.05
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Specialty Lines Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 369.20	

C.	Full Name (Last, First, Middle Initial) LORI A DESCH	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 5 TREGONWELL COURT	Transaction ID: A2008-538198
	City State Zip Code ALGONQUIN IL 60102	Amount of Each Receipt this Period 33.55
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claim Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.35	

SUBTOTAL of Receipts This Page (optional)	▶	141.65
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) SARAH R DONAHUE		Date of Receipt
	Mailing Address 4147 RFD		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	LONG GROVE	IL	60047
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation AVP Northbrook/Glenbrook	Transaction ID: A2008-473317
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="337.10"/>	<input type="text" value="57.35"/>

B.	Full Name (Last, First, Middle Initial) SARAH R DONAHUE		Date of Receipt
	Mailing Address 4147 RFD		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	LONG GROVE	IL	60047
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation AVP Northbrook/Glenbrook	Transaction ID: A2008-538355
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="394.45"/>	<input type="text" value="57.35"/>

C.	Full Name (Last, First, Middle Initial) TIMOTHY R DUGAN		Date of Receipt
	Mailing Address 3220 SANDY LANE		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	Transaction ID: A2008-538460
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.21"/>	<input type="text" value="30.98"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="145.68"/>
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 30 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) PHILIP L EMMANUELE	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 1085 FOREST HILL RD.	Transaction ID: A2008-473076
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 60.90
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Marketing Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.90	

B.	Full Name (Last, First, Middle Initial) PHILIP L EMMANUELE	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 1085 FOREST HILL RD.	Transaction ID: A2008-538115
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 60.90
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Marketing Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 421.80	

C.	Full Name (Last, First, Middle Initial) KATHLEEN N ENRIGHT	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 10323 TRUMBULL AVE	Transaction ID: A2008-473332
	City State Zip Code CHICAGO IL 60655	Amount of Each Receipt this Period 36.08
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 209.53	

SUBTOTAL of Receipts This Page (optional)	157.88
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 31 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KATHLEEN 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 Allstate Insurance Company Occupation AVP Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.61

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538370

Amount of Each Receipt this Period
36.08

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

Mailing Address 660 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

Name of Employer Allstate Insurance Company Occupation AVP Finance Innovation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 303.59

Date of Receipt
MM / DD / YYYY
03 / 14 / 2008

Transaction ID: A2008-473059

Amount of Each Receipt this Period
52.69

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

Mailing Address 660 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

Name of Employer Allstate Insurance Company Occupation AVP Finance Innovation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.28

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538098

Amount of Each Receipt this Period
52.69

SUBTOTAL of Receipts This Page (optional) ► 141.46

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

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

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

FOR LINE NUMBER: PAGE 32 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 673 HASTINGS ROAD

City State Zip Code
WHEELING IL 60090

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

Name of Employer Allstate Insurance Company Occupation Unclassified Sr Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 219.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

Transaction ID: A2008-538291

Amount of Each Receipt this Period
32.26

B. Full Name (Last, First, Middle Initial)
THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 251.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: A2008-473092

Amount of Each Receipt this Period
42.94

C. Full Name (Last, First, Middle Initial)
THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 294.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

Transaction ID: A2008-538130

Amount of Each Receipt this Period
42.94

SUBTOTAL of Receipts This Page (optional) ► **118.14**

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 33 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
DOROTHY EVEN

Mailing Address 1130 KEYSTONE AVENUE

City State Zip Code
RIVER FOREST IL 60305

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

Name of Employer Allstate Insurance Company Occupation Senior Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 492.75

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473228

Amount of Each Receipt this Period
83.70

B.

Full Name (Last, First, Middle Initial)
DOROTHY EVEN

Mailing Address 1130 KEYSTONE AVENUE

City State Zip Code
RIVER FOREST IL 60305

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

Name of Employer Allstate Insurance Company Occupation Senior Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 576.45

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538267

Amount of Each Receipt this Period
83.70

C.

Full Name (Last, First, Middle Initial)
KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.23

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473375

Amount of Each Receipt this Period
38.98

SUBTOTAL of Receipts This Page (optional) ► 206.38

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 34 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 267.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

Transaction ID: A2008-538413

Amount of Each Receipt this Period
38.98

B. Full Name (Last, First, Middle Initial)
GORDON S FALKNOR

Mailing Address 703 E CHERRY LN

City State Zip Code
ARLINGTON HTS IL 60004

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 278.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: A2008-473250

Amount of Each Receipt this Period
48.06

C. Full Name (Last, First, Middle Initial)
GORDON S FALKNOR

Mailing Address 703 E CHERRY LN

City State Zip Code
ARLINGTON HTS IL 60004

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 326.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

Transaction ID: A2008-538288

Amount of Each Receipt this Period
48.06

SUBTOTAL of Receipts This Page (optional) ► **135.10**

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 35 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 Allstate Insurance Company Occupation AVP Specialty Lines

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 223.96

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473245

Amount of Each Receipt this Period
38.56

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

Mailing Address 613 REX

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP Specialty Lines

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.52

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538283

Amount of Each Receipt this Period
38.56

C. Full Name (Last, First, Middle Initial)
PATRICIA W FRIDLEY

Mailing Address 945 Shermer Road

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Allstate Insurance Company Occupation Senior Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 371.55

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473172

Amount of Each Receipt this Period
74.31

SUBTOTAL of Receipts This Page (optional) ► **151.43**

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 36 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICIA W FRIDLEY
Mailing Address 945 Shermer Road
City NORTHBROOK State IL Zip Code 60062
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior Managing Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 445.86
Date of Receipt 03 / 28 / 2008
Transaction ID: A2008-538211
Amount of Each Receipt this Period 74.31

B. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER
Mailing Address 350 EDGE FIELD LANE
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Marketing Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.62
Date of Receipt 03 / 14 / 2008
Transaction ID: A2008-473171
Amount of Each Receipt this Period 39.77

C. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER
Mailing Address 350 EDGE FIELD LANE
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Marketing Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 278.39
Date of Receipt 03 / 28 / 2008
Transaction ID: A2008-538210
Amount of Each Receipt this Period 39.77

SUBTOTAL of Receipts This Page (optional) ► 153.85
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 37 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 22255 MASHIE CT

City State Zip Code
IVANHOE IL 60060

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

Name of Employer Occupation
Allstate Insurance Company Senior Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 202.24

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538147

Amount of Each Receipt this Period

29.67

B.

Full Name (Last, First, Middle Initial)
PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Vice President & Assistan

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 354.13

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473113

Amount of Each Receipt this Period

60.98

C.

Full Name (Last, First, Middle Initial)
PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Vice President & Assistan

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.11

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538151

Amount of Each Receipt this Period

60.98

SUBTOTAL of Receipts This Page (optional) ▶

151.63

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 38 / 142
(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. Full Name (Last, First, Middle Initial)
KAREN C GARDNER
Mailing Address 1434 BAFFIN ROAD
City GLENVIEW State IL Zip Code 60025
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Tax
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 411.81
Date of Receipt 03 / 14 / 2008
Transaction ID: A2008-473406
Amount of Each Receipt this Period 70.91

B. Full Name (Last, First, Middle Initial)
KAREN C GARDNER
Mailing Address 1434 BAFFIN ROAD
City GLENVIEW State IL Zip Code 60025
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Tax
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 482.72
Date of Receipt 03 / 28 / 2008
Transaction ID: A2008-538444
Amount of Each Receipt this Period 70.91

C. Full Name (Last, First, Middle Initial)
LYNN A GEHANT
Mailing Address 23W650 WOODWORTH PLACE
City ROSELLE State IL Zip Code 60172
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior State Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 217.50
Date of Receipt 03 / 14 / 2008
Transaction ID: A2008-473254
Amount of Each Receipt this Period 37.15

SUBTOTAL of Receipts This Page (optional) ► 178.97
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 39 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
LYNN A GEHANT

Mailing Address 23W650 WOODWORTH PLACE

City State Zip Code
ROSELLE IL 60172

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

Name of Employer Occupation
Allstate Insurance Company Senior State Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 254.65

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538292

Amount of Each Receipt this Period

37.15

B.

Full Name (Last, First, Middle Initial)
BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60195

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

Name of Employer Occupation
Allstate Insurance Company AVP State Team

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.53

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538445

Amount of Each Receipt this Period

31.44

C.

Full Name (Last, First, Middle Initial)
JOAN 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 Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.48

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473060

Amount of Each Receipt this Period

96.63

SUBTOTAL of Receipts This Page (optional)

165.22

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 40 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
JOAN 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 Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.25

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538099

Amount of Each Receipt this Period
39.77

B.

Full Name (Last, First, Middle Initial)
MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
Allstate Insurance Company Vice President Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 428.55

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473296

Amount of Each Receipt this Period
73.50

C.

Full Name (Last, First, Middle Initial)
MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
Allstate Insurance Company Vice President Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 502.05

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538334

Amount of Each Receipt this Period
73.50

SUBTOTAL of Receipts This Page (optional) ▶

186.77

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 41 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
DENNIS C GOMEZ

Mailing Address 3 ROBERT COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Vice President Human Reso

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 359.20

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473089

Amount of Each Receipt this Period
61.85

B.

Full Name (Last, First, Middle Initial)
DENNIS C GOMEZ

Mailing Address 3 ROBERT COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Vice President Human Reso

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.05

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538127

Amount of Each Receipt this Period
61.85

C.

Full Name (Last, First, Middle Initial)
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 Allstate Insurance Company Occupation Associate Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.80

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538496

Amount of Each Receipt this Period
32.80

SUBTOTAL of Receipts This Page (optional) ► **156.50**

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 42 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JUDITH P GREFFIN
 Mailing Address 948 NORTH EUCLID AVENUE
 City State Zip Code
 OAK PARK IL 60302
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 14 / 2008
Transaction ID: A2008-473176
 Amount of Each Receipt this Period
 48.51
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.26

B. Full Name (Last, First, Middle Initial)
JUDITH P GREFFIN
 Mailing Address 948 NORTH EUCLID AVENUE
 City State Zip Code
 OAK PARK IL 60302
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 28 / 2008
Transaction ID: A2008-538215
 Amount of Each Receipt this Period
 48.51
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Senior Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.77

C. Full Name (Last, First, Middle Initial)
JAMES W HAIDU
 Mailing Address 3 South Wynstone
 City State Zip Code
 N. BARRINGTON IL 60010
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 14 / 2008
Transaction ID: A2008-473306
 Amount of Each Receipt this Period
 55.36
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Ivantage AVP Specialty Li
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.51

SUBTOTAL of Receipts This Page (optional) ► 152.38
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 43 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JAMES W HAIDU
Mailing Address 3 South Wynstone
City N. BARRINGTON State IL Zip Code 60010
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Ivantage AVP Specialty Li
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 371.87
Date of Receipt 03 / 28 / 2008
Transaction ID: A2008-538344
Amount of Each Receipt this Period 55.36

B. Full Name (Last, First, Middle Initial)
DANNY L HALE
Mailing Address 1071 OLMSTED DRIVE
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 Chf Financial Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 843.66
Date of Receipt 03 / 14 / 2008
Transaction ID: A2008-473374
Amount of Each Receipt this Period 140.61

C. Full Name (Last, First, Middle Initial)
DANNY L HALE
Mailing Address 1071 OLMSTED DRIVE
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 Chf Financial Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 984.27
Date of Receipt 03 / 28 / 2008
Transaction ID: A2008-538412
Amount of Each Receipt this Period 140.61

SUBTOTAL of Receipts This Page (optional) ► 336.58
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 44 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RANDALL M HANSON
 Mailing Address 840 ALLEGHANY
 City State Zip Code
 GRAYSLAKE IL 60030
 Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 0 8
Transaction ID: A2008-538453
 Amount of Each Receipt this Period
 32.47
 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 ▼ 219.59

B. Full Name (Last, First, Middle Initial)
MICHAEL L HARRISON
 Mailing Address 1141 WINNERS CIRCLE
 City State Zip Code
 LIBERTYVILLE IL 60048
 Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 1 4 / 2 0 0 8
Transaction ID: A2008-473463
 Amount of Each Receipt this Period
 132.55
 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 ▼ 795.30

C. Full Name (Last, First, Middle Initial)
MICHAEL L HARRISON
 Mailing Address 1141 WINNERS CIRCLE
 City State Zip Code
 LIBERTYVILLE IL 60048
 Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 0 8
Transaction ID: A2008-538501
 Amount of Each Receipt this Period
 132.55
 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 ▼ 927.85

SUBTOTAL of Receipts This Page (optional) ► 297.57
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) DANIEL J HEBEL	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 28365 West Big Hollow Road	Transaction ID: A2008-473167
	City State Zip Code Ingleside IL 60041	Amount of Each Receipt this Period 67.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Fiel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 392.40	

B.	Full Name (Last, First, Middle Initial) DANIEL J HEBEL	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 28365 West Big Hollow Road	Transaction ID: A2008-538206
	City State Zip Code Ingleside IL 60041	Amount of Each Receipt this Period 67.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Fiel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 459.70	

C.	Full Name (Last, First, Middle Initial) ROBERT L HERRING	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 4337 SPRUCE BOUGH DR	Transaction ID: A2008-538417
	City State Zip Code MARIETTA GA 30062	Amount of Each Receipt this Period 32.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Distribution Support Lead Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 216.70	

SUBTOTAL of Receipts This Page (optional)	166.75
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
WILLIAM 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 Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 503.46

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473134

Amount of Each Receipt this Period

88.06

B.

Full Name (Last, First, Middle Initial)
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 Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 591.52

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538172

Amount of Each Receipt this Period

88.06

C.

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

Mailing Address 8 PELHAM ROAD

City State Zip Code
WESTON MA 02493

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

Name of Employer Occupation
Allstate Insurance Company Assistant Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.63

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473466

Amount of Each Receipt this Period

45.23

SUBTOTAL of Receipts This Page (optional)

221.35

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 47 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 8 PELHAM ROAD

City State Zip Code
WESTON MA 02493

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

Name of Employer Occupation
Allstate Insurance Company Assistant Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	0	8

Transaction ID: A2008-538504

Amount of Each Receipt this Period

45.23

B.

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

Mailing Address 1937 Veterans Blvd

City State Zip Code
Metairie LA 70005

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

Name of Employer Occupation
Allstate Insurance Company Marketing Claims Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 202.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	0	8

Transaction ID: A2008-538225

Amount of Each Receipt this Period

30.00

C.

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

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 262.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	8

Transaction ID: A2008-473281

Amount of Each Receipt this Period

45.22

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 48 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 307.84

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538319

Amount of Each Receipt this Period
45.22

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

Mailing Address 3602 FRANKLIN CT.

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 461.64

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473213

Amount of Each Receipt this Period
79.49

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

Mailing Address 3602 FRANKLIN CT.

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 541.13

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538252

Amount of Each Receipt this Period
79.49

SUBTOTAL of Receipts This Page (optional) ► 204.20

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 49 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation F&P/Enterprise Risk Manag

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.15

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538246

Amount of Each Receipt this Period
32.85

B. Full Name (Last, First, Middle Initial)
DOLORES M JOSSUND

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
CHICAGO IL 60646

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 ▼ 238.62

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473267

Amount of Each Receipt this Period
39.77

C. Full Name (Last, First, Middle Initial)
DOLORES M JOSSUND

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
CHICAGO IL 60646

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 278.39

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538305

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional) ► 112.39

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 50 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
JEFF L KAUFMAN

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
PARKER CO 80134

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 498.48

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473431

Amount of Each Receipt this Period
83.08

B.

Full Name (Last, First, Middle Initial)
JEFF L KAUFMAN

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
PARKER CO 80134

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 581.56

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538469

Amount of Each Receipt this Period
83.08

C.

Full Name (Last, First, Middle Initial)
TERRY KELAHER

Mailing Address 924 W. CHESTERFIELD CT.

City State Zip Code
PALATINE IL 60067

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

Name of Employer Allstate Insurance Company Occupation Vice President & General

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 485.40

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473277

Amount of Each Receipt this Period
82.25

SUBTOTAL of Receipts This Page (optional) ► 248.41

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 51 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
TERRY KELAHER

Mailing Address 924 W. CHESTERFIELD CT.

City State Zip Code
PALATINE IL 60067

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

Name of Employer Occupation
Allstate Insurance Company Vice President & General

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 567.65

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538315

Amount of Each Receipt this Period

82.25

B.

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

Mailing Address 1975 ROSE TERRACE

City State Zip Code
RIVERWOODS IL 60015

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

Name of Employer Occupation
Allstate Insurance Company Senior State Manager

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 260.44

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473047

Amount of Each Receipt this Period

44.84

C.

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

Mailing Address 1975 ROSE TERRACE

City State Zip Code
RIVERWOODS IL 60015

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

Name of Employer Occupation
Allstate Insurance Company Senior State Manager

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 305.28

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538087

Amount of Each Receipt this Period

44.84

SUBTOTAL of Receipts This Page (optional)

171.93

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 223.25

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473209

Amount of Each Receipt this Period
38.75

B.

Full Name (Last, First, Middle Initial)
CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538248

Amount of Each Receipt this Period
38.75

C.

Full Name (Last, First, Middle Initial)
JAMES P KING

Mailing Address 592 TURNER AVENUE

City State Zip Code
GLEN ELLYN IL 60137

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 213.95

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473336

Amount of Each Receipt this Period
36.55

SUBTOTAL of Receipts This Page (optional) ► **114.05**

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 53 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JAMES P KING
 Mailing Address 592 TURNER AVENUE
 City State Zip Code
 GLEN ELLYN IL 60137
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2008
Transaction ID: A2008-538374
 Amount of Each Receipt this Period
 36.55
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Home Office Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.50

B. Full Name (Last, First, Middle Initial)
JEFFREY D KNIPP
 Mailing Address 2050 GLENDALE AVE
 City State Zip Code
 NORTHBROOK IL 60062
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2008
Transaction ID: A2008-538450
 Amount of Each Receipt this Period
 29.87
 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 ▼ 200.34

C. Full Name (Last, First, Middle Initial)
GARY L KOCHANЕК
 Mailing Address 743 CARDIGAN CT
 City State Zip Code
 NAPERVILLE IL 60565
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2008
Transaction ID: A2008-538255
 Amount of Each Receipt this Period
 32.70
 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 ▼ 228.90

SUBTOTAL of Receipts This Page (optional) ► 99.12
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 54 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 303.34

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473211

Amount of Each Receipt this Period
104.49

B.

Full Name (Last, First, Middle Initial)
JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 343.11

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538250

Amount of Each Receipt this Period
39.77

C.

Full Name (Last, First, Middle Initial)
MICHAEL A LA MONICA

Mailing Address 22401 BROOKSIDE WAY

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Vice President Product

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 405.09

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473265

Amount of Each Receipt this Period
68.64

SUBTOTAL of Receipts This Page (optional) ▶

212.90

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

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

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

FOR LINE NUMBER: PAGE 55 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL A LA MONICA

Mailing Address 22401 BROOKSIDE WAY

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 473.73

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538303

Amount of Each Receipt this Period
68.64

B. Full Name (Last, First, Middle Initial)
ANTHONY LASKA

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.11

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473068

Amount of Each Receipt this Period
46.51

C. Full Name (Last, First, Middle Initial)
ANTHONY LASKA

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 316.62

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538107

Amount of Each Receipt this Period
46.51

SUBTOTAL of Receipts This Page (optional) ► 161.66

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 56 / 142
(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. Full Name (Last, First, Middle Initial)
PHILLIP E LAWSON

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 441.16

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473419

Amount of Each Receipt this Period
75.96

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

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 517.12

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538457

Amount of Each Receipt this Period
75.96

C. Full Name (Last, First, Middle Initial)
CATHY A LAZAROFF

Mailing Address 910 S MICHIGAN AVE #1503

City State Zip Code
CHICAGO IL 60605

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.57

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473055

Amount of Each Receipt this Period
58.72

SUBTOTAL of Receipts This Page (optional) ► **210.64**

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 57 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CATHY A LAZAROFF

Mailing Address 910 S MICHIGAN AVE #1503

City State Zip Code
CHICAGO IL 60605

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.29

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538094

Amount of Each Receipt this Period
58.72

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

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 353.04

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473461

Amount of Each Receipt this Period
60.79

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

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 413.83

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538499

Amount of Each Receipt this Period
60.79

SUBTOTAL of Receipts This Page (optional) ► **180.30**

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 58 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
ANDREW P LEICHT

Mailing Address 25658 N ARROWHEAD

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Occupation
Allstate Insurance Company CC IT Planning Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 228.83

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: A2008-538260

Amount of Each Receipt this Period

32.69

B.

Full Name (Last, First, Middle Initial)
JOHN C LOUNDS

Mailing Address 4424 STONEHAVEN

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Vice President Product AF

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 221.97

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 0 8

Transaction ID: A2008-473359

Amount of Each Receipt this Period

37.92

C.

Full Name (Last, First, Middle Initial)
JOHN C LOUNDS

Mailing Address 4424 STONEHAVEN

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Vice President Product AF

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 259.89

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: A2008-538397

Amount of Each Receipt this Period

37.92

SUBTOTAL of Receipts This Page (optional)

108.53

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 59 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 343 S. DEARBORN ST. APT. 504

City State Zip Code
CHICAGO IL 60604

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.92

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538358

Amount of Each Receipt this Period
31.86

B. Full Name (Last, First, Middle Initial)
MORRIS A MADURO

Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 229.02

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473067

Amount of Each Receipt this Period
39.77

C. Full Name (Last, First, Middle Initial)
MORRIS A MADURO

Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.79

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538106

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional) ► **111.40**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
FELIX A MANTILLA

Mailing Address 28601 N. Sky Crest Drive

City State Zip Code
Ivanhoe IL 60060

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 284.02

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473371

Amount of Each Receipt this Period
48.52

B.

Full Name (Last, First, Middle Initial)
FELIX A MANTILLA

Mailing Address 28601 N. Sky Crest Drive

City State Zip Code
Ivanhoe IL 60060

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 332.54

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538409

Amount of Each Receipt this Period
48.52

C.

Full Name (Last, First, Middle Initial)
MICHAEL P MARK

Mailing Address 3178 HAVEN LANE

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Planning Con

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.02

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473297

Amount of Each Receipt this Period
37.67

SUBTOTAL of Receipts This Page (optional) ► 134.71

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 61 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
MICHAEL P MARK

Mailing Address 3178 HAVEN LANE

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Planning Con

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.69

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538335

Amount of Each Receipt this Period
37.67

B.

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

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
BARRINGTON HILL IL 60010

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.02

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473305

Amount of Each Receipt this Period
77.72

C.

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

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
BARRINGTON HILL IL 60010

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 532.74

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538343

Amount of Each Receipt this Period
77.72

SUBTOTAL of Receipts This Page (optional) ► **193.11**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 25748 N. Stoney Kirk Ct.

City Hawthorn Woods State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.56

Date of Receipt: 03 / 14 / 2008
Transaction ID: A2008-473252
 Amount of Each Receipt this Period: 39.76

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

Mailing Address 25748 N. Stoney Kirk Ct.

City Hawthorn Woods State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 278.32

Date of Receipt: 03 / 28 / 2008
Transaction ID: A2008-538290
 Amount of Each Receipt this Period: 39.76

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

Mailing Address 28 MANCERA

City RANCHO SANTA MA State CA Zip Code 92688

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.70

Date of Receipt: 03 / 28 / 2008
Transaction ID: A2008-538473
 Amount of Each Receipt this Period: 31.60

SUBTOTAL of Receipts This Page (optional) ► 111.12

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 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 1207 DEVENS DRIVE

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Allstate Insurance Company Occupation Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.21

Date of Receipt
MM / DD / YYYY
03 / 14 / 2008

Transaction ID: A2008-473129

Amount of Each Receipt this Period
49.96

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

Mailing Address 1207 DEVENS DRIVE

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Allstate Insurance Company Occupation Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.17

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538167

Amount of Each Receipt this Period
49.96

C. Full Name (Last, First, Middle Initial)
GARY A MELLINI

Mailing Address 21050 PRESTWICK DRIVE

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 229.63

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538101

Amount of Each Receipt this Period
33.64

SUBTOTAL of Receipts This Page (optional) ► 133.56

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 64 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) LAWRENCE P MOEWS	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 740 W. JENNIFER CT.	Transaction ID: A2008-473224
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 50.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Investor R Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 297.94	

B.	Full Name (Last, First, Middle Initial) LAWRENCE P MOEWS	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 740 W. JENNIFER CT.	Transaction ID: A2008-538263
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 50.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Investor R Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 348.83	

C.	Full Name (Last, First, Middle Initial) EDWARD J MORAN	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 131 ADELAIDE UNIT 406	Transaction ID: A2008-473119
	City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 50.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP PCCSO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 293.49	

SUBTOTAL of Receipts This Page (optional)	▶	152.12
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 65 / 142
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
EDWARD J MORAN

Mailing Address 131 ADELAIDE UNIT 406

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP PCCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 343.83

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538157

Amount of Each Receipt this Period
50.34

B.

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

Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 274.56

Date of Receipt
MM / DD / YYYY
03 / 14 / 2008

Transaction ID: A2008-473324

Amount of Each Receipt this Period
75.76

C.

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

Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 314.32

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538362

Amount of Each Receipt this Period
39.76

SUBTOTAL of Receipts This Page (optional) ► **165.86**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MEGHAN O MULVIHILL	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 2445 CHERRY LANE	Transaction ID: A2008-538164
	City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 32.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Associate Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) MICHAEL F MULVIHILL	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 2445 CHERRY LANE	Transaction ID: A2008-473217
	City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 38.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 222.33	

C.	Full Name (Last, First, Middle Initial) MICHAEL F MULVIHILL	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 2445 CHERRY LANE	Transaction ID: A2008-538256
	City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 38.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.46	

SUBTOTAL of Receipts This Page (optional)	▶	108.41
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 67 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.57

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473403

Amount of Each Receipt this Period

39.77

B.

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

Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 278.34

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538441

Amount of Each Receipt this Period

39.77

C.

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

Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 293.42

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473343

Amount of Each Receipt this Period

50.72

SUBTOTAL of Receipts This Page (optional)

130.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 344.14

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538381

Amount of Each Receipt this Period
50.72

B.

Full Name (Last, First, Middle Initial)
BRIAN J NAGEL

Mailing Address 1211 AIMTREE

City State Zip Code
SCHAUMBURG IL 60194

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

Name of Employer Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473247

Amount of Each Receipt this Period
37.95

C.

Full Name (Last, First, Middle Initial)
BRIAN J NAGEL

Mailing Address 1211 AIMTREE

City State Zip Code
SCHAUMBURG IL 60194

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

Name of Employer Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 261.95

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538285

Amount of Each Receipt this Period
37.95

SUBTOTAL of Receipts This Page (optional) ▶

126.62

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 69 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 22622 N. LINDEN DR

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 657.70

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473203

Amount of Each Receipt this Period
113.70

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

Mailing Address 22622 N. LINDEN DR

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 771.40

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538242

Amount of Each Receipt this Period
113.70

C. Full Name (Last, First, Middle Initial)
THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City State Zip Code
WAUKEGAN IL 60085

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

Name of Employer Allstate Insurance Company Occupation Human Resource Senior Man

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.14

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538375

Amount of Each Receipt this Period
30.32

SUBTOTAL of Receipts This Page (optional) ► 257.72

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
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 Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.34

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473311

Amount of Each Receipt this Period
38.89

B.

Full Name (Last, First, Middle Initial)
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 Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.23

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538349

Amount of Each Receipt this Period
38.89

C.

Full Name (Last, First, Middle Initial)
CRAIG A OLDHAM

Mailing Address 2606 N Paulina ST

City State Zip Code
CHICAGO IL 60614

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 ▼ 205.14

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473378

Amount of Each Receipt this Period
35.04

SUBTOTAL of Receipts This Page (optional) ► 112.82

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
CRAIG A OLDHAM

Mailing Address 2606 N Paulina ST

City State Zip Code
CHICAGO IL 60614

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 ▼ 240.18

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: A2008-538416

Amount of Each Receipt this Period

35.04

B.

Full Name (Last, First, Middle Initial)
JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Vice President Procuremen

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.68

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 4 / 2 0 0 8

Transaction ID: A2008-473394

Amount of Each Receipt this Period

67.20

C.

Full Name (Last, First, Middle Initial)
JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Vice President Procuremen

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 392.88

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: A2008-538432

Amount of Each Receipt this Period

67.20

SUBTOTAL of Receipts This Page (optional) ▶

169.44

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 72 / 142
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 9352 ANSLEY LANE

City State Zip Code
BRENTWOOD TN 37027

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 ▼ 216.53

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473162

Amount of Each Receipt this Period

37.58

B.

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

Mailing Address 9352 ANSLEY LANE

City State Zip Code
BRENTWOOD TN 37027

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 ▼ 254.11

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538201

Amount of Each Receipt this Period

37.58

C.

Full Name (Last, First, Middle Initial)
ALAN D PAGE

Mailing Address 13530 LUCKY LAKE DRIVE

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-Agency Distribution

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 219.48

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473455

Amount of Each Receipt this Period

37.73

SUBTOTAL of Receipts This Page (optional) ▶

112.89

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

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

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

FOR LINE NUMBER: PAGE 73 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ALAN D PAGE

Mailing Address 13530 LUCKY LAKE DRIVE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.21

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538493

Amount of Each Receipt this Period
37.73

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

Mailing Address 3406 VICEROY COURT

City State Zip Code
EDGEWATER MD 21037

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 279.97

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473121

Amount of Each Receipt this Period
81.12

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

Mailing Address 3406 VICEROY COURT

City State Zip Code
EDGEWATER MD 21037

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 319.74

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538159

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional) ► 158.62

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 74 / 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) ROBERT L PARK	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 1107 BONITA DRIVE	Transaction ID: A2008-473312
	City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 53.82
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Public Relations Mana Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 316.37	

B.	Full Name (Last, First, Middle Initial) ROBERT L PARK	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 1107 BONITA DRIVE	Transaction ID: A2008-538350
	City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 53.82
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Public Relations Mana Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 370.19	

C.	Full Name (Last, First, Middle Initial) ROGER D PARKER	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 1305 N MAIDSTONE	Transaction ID: A2008-473452
	City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 49.69
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Corporate Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.59	

SUBTOTAL of Receipts This Page (optional)	157.33
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 75 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
ROGER D PARKER

Mailing Address 1305 N MAIDSTONE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation AVP Corporate Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.28

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538490

Amount of Each Receipt this Period
49.69

B.

Full Name (Last, First, Middle Initial)
MAYUR M PATEL

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 Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 214.13

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538287

Amount of Each Receipt this Period
31.24

C.

Full Name (Last, First, Middle Initial)
CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.10

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473108

Amount of Each Receipt this Period
74.40

SUBTOTAL of Receipts This Page (optional) ► 155.33

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Vice President PCCSO Stra

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 506.50

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538146

Amount of Each Receipt this Period

74.40

B.

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

Mailing Address 934 LEWIS PLACE

City State Zip Code
GENEVA IL 60134

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

Name of Employer Occupation
Allstate Insurance Company Ivantage Financial Manage

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.17

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538326

Amount of Each Receipt this Period

30.16

C.

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

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
LAKE FOREST IL 60045

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.71

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473073

Amount of Each Receipt this Period

49.56

SUBTOTAL of Receipts This Page (optional) ▶

154.12

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 77 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
LAKE FOREST IL 60045

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 336.27

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538112

Amount of Each Receipt this Period

49.56

B.

Full Name (Last, First, Middle Initial)
Thomas 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 CC IT Senior Manager

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 211.20

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538506

Amount of Each Receipt this Period

30.60

C.

Full Name (Last, First, Middle Initial)
STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City State Zip Code
MUNDELEIN IL 60060

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 294.51

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473072

Amount of Each Receipt this Period

50.31

SUBTOTAL of Receipts This Page (optional) ▶

130.47

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 78 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 580 SALCEDA DR

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer
Allstate Insurance Company

Occupation
AVP Property & Casualty F

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
344.82

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538111

Amount of Each Receipt this Period
50.31

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

Mailing Address 2116 W CHURCHILL ST

City State Zip Code
CHICAGO IL 60647

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

Name of Employer
Allstate Insurance Company

Occupation
Vice President Finance -

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
397.05

Date of Receipt
MM / DD / YYYY
03 / 14 / 2008

Transaction ID: A2008-473202

Amount of Each Receipt this Period
69.45

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

Mailing Address 2116 W CHURCHILL ST

City State Zip Code
CHICAGO IL 60647

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

Name of Employer
Allstate Insurance Company

Occupation
Vice President Finance -

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
466.50

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538241

Amount of Each Receipt this Period
69.45

SUBTOTAL of Receipts This Page (optional) ► **189.21**

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 79 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID J PRENDERGAST
Mailing Address 2816 HAVEN LANE

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.10

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473065

Amount of Each Receipt this Period
40.90

B. Full Name (Last, First, Middle Initial)
DAVID J PRENDERGAST
Mailing Address 2816 HAVEN LANE

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 279.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538104

Amount of Each Receipt this Period
40.90

C. Full Name (Last, First, Middle Initial)
JORGE A QUEZADA
Mailing Address 1407 W. GROVE ST

City State Zip Code
ARLINGTON HGTS IL 60005

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

Name of Employer Allstate Insurance Company Occupation Senior Product Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.86

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538500

Amount of Each Receipt this Period
30.78

SUBTOTAL of Receipts This Page (optional) ► **112.58**

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 80 / 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JOSEPH P RATH	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 359 STAFFORD COURT	Transaction ID: A2008-473173
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 58.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel & Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.98	

B.	Full Name (Last, First, Middle Initial) JOSEPH P RATH	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 359 STAFFORD COURT	Transaction ID: A2008-538212
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 58.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel & Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 397.11	

C.	Full Name (Last, First, Middle Initial) JOHN B REARDON	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 441 KELLY LANE	Transaction ID: A2008-473051
	City State Zip Code CRYSTAL LAKE IL 60012	Amount of Each Receipt this Period 43.60
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claims Senior Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 247.35	

SUBTOTAL of Receipts This Page (optional)	159.86
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JOHN B REARDON	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 441 KELLY LANE	Transaction ID: A2008-538090
	City State Zip Code CRYSTAL LAKE IL 60012	Amount of Each Receipt this Period 43.60
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claims Senior Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 290.95	

B.	Full Name (Last, First, Middle Initial) KEVIN P RICE	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 703 ETON COURT	Transaction ID: A2008-473259
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 36.18
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation CC IT Senior Planning Con Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.13	

C.	Full Name (Last, First, Middle Initial) KEVIN P RICE	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 703 ETON COURT	Transaction ID: A2008-538297
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 36.18
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation CC IT Senior Planning Con Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 246.31	

SUBTOTAL of Receipts This Page (optional)	▶	115.96
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 82 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 1411 PARSONS LANE

City State Zip Code
LOWER GWYNEDD PA 19002

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 418.50

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473111

Amount of Each Receipt this Period
72.35

B.

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

Mailing Address 1411 PARSONS LANE

City State Zip Code
LOWER GWYNEDD PA 19002

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.85

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538149

Amount of Each Receipt this Period
72.35

C.

Full Name (Last, First, Middle Initial)
ANDREW T RIEDER

Mailing Address 7 ONEIDA LANE

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP Homeowner Initiative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 284.43

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473115

Amount of Each Receipt this Period
48.58

SUBTOTAL of Receipts This Page (optional) ► 193.28

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 83 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ANDREW T RIEDER

Mailing Address 7 ONEIDA LANE

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP Homeowner Initiative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 333.01

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538153

Amount of Each Receipt this Period
48.58

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

Mailing Address 1632 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 489.81

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473399

Amount of Each Receipt this Period
85.96

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

Mailing Address 1632 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 575.77

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538437

Amount of Each Receipt this Period
85.96

SUBTOTAL of Receipts This Page (optional) ► **220.50**

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: (check only one)	PAGE 84 / 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MARIO RIZZO		Date of Receipt	
	Mailing Address 5926 W. 90TH PLACE		M M / D D / Y Y Y Y Y 03 / 14 / 2008	
	City	State	Zip Code	Transaction ID: A2008-473263
	OAK LAWN	IL	60453	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		44.55	
Name of Employer Allstate Insurance Company		Occupation AVP Property & Casualty F		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 246.60		

B.	Full Name (Last, First, Middle Initial) MARIO RIZZO		Date of Receipt	
	Mailing Address 5926 W. 90TH PLACE		M M / D D / Y Y Y Y Y 03 / 28 / 2008	
	City	State	Zip Code	Transaction ID: A2008-538301
	OAK LAWN	IL	60453	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		44.55	
Name of Employer Allstate Insurance Company		Occupation AVP Property & Casualty F		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 291.15		

C.	Full Name (Last, First, Middle Initial) CLAY F ROBERTS		Date of Receipt	
	Mailing Address 3075 Sanders Road Suite G2E		M M / D D / Y Y Y Y Y 03 / 14 / 2008	
	City	State	Zip Code	Transaction ID: A2008-473453
	Northbrook	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		35.56	
Name of Employer Allstate Insurance Company		Occupation CC IT Planning Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 208.21		

SUBTOTAL of Receipts This Page (optional)	▶	124.66
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 85 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
CLAY F ROBERTS

Mailing Address 3075 Sanders Road Suite G2E

City State Zip Code
Northbrook IL 60062

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

Name of Employer Occupation
Allstate Insurance Company CC IT Planning Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 243.77

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538491

Amount of Each Receipt this Period

35.56

B.

Full Name (Last, First, Middle Initial)
TED ROBERTS

Mailing Address 811 SANDY TRAIL

City State Zip Code
KELLER TX 76248

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

Name of Employer Occupation
Allstate Insurance Company Financial Services Consul

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 203.74

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538456

Amount of Each Receipt this Period

29.72

C.

Full Name (Last, First, Middle Initial)
MICHAEL J ROCHE

Mailing Address 270 KINGSWAY DRIVE

City State Zip Code
AURORA IL 60506

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

Name of Employer Occupation
Allstate Insurance Company SVP-PROTECTION TECH & ADM

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 567.28

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473278

Amount of Each Receipt this Period

97.68

SUBTOTAL of Receipts This Page (optional) ►

162.96

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MICHAEL J ROCHE		Date of Receipt
	Mailing Address 270 KINGSWAY DRIVE		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	AURORA	IL	60506
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538316
Name of Employer Allstate Insurance Company		Occupation SVP-PROTECTION TECH & ADM	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="97.68"/>
		<input type="text" value="664.96"/>	

B.	Full Name (Last, First, Middle Initial) GREGORY C ROHLFING		Date of Receipt
	Mailing Address 106 ASHLAND		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	RIVER FOREST	IL	60305
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-473197
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="99.77"/>
		<input type="text" value="298.62"/>	

C.	Full Name (Last, First, Middle Initial) GREGORY C ROHLFING		Date of Receipt
	Mailing Address 106 ASHLAND		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	RIVER FOREST	IL	60305
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538236
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="39.77"/>
		<input type="text" value="338.39"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="237.22"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City	State	Zip Code
HINSDALE	IL	60521

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

Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel
--	---

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.86
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538310

Amount of Each Receipt this Period

32.40

B.

Full Name (Last, First, Middle Initial)
GEORGE E RUEBENSON

Mailing Address 29 FOX TR

City	State	Zip Code
LINCOLNSHIRE	IL	60069

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

Name of Employer Allstate Insurance Company	Occupation SVP-P-CCSO
--	--------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.38
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473329

Amount of Each Receipt this Period

144.23

C.

Full Name (Last, First, Middle Initial)
GEORGE E RUEBENSON

Mailing Address 29 FOX TR

City	State	Zip Code
LINCOLNSHIRE	IL	60069

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

Name of Employer Allstate Insurance Company	Occupation SVP-P-CCSO
--	--------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1009.61
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538367

Amount of Each Receipt this Period

144.23

SUBTOTAL of Receipts This Page (optional) ▶

320.86

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) PATRICK J SCHNEIDER	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 210 NORTH TRAIL	Transaction ID: A2008-538353
	City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 29.78
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 203.41	

B.	Full Name (Last, First, Middle Initial) STEPHEN E SCHOLL	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 7 COPPERFIELD DRIVE	Transaction ID: A2008-473102
	City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 52.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP HR Shared Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 304.74	

C.	Full Name (Last, First, Middle Initial) STEPHEN E SCHOLL	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 7 COPPERFIELD DRIVE	Transaction ID: A2008-538140
	City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 52.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP HR Shared Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 357.63	

SUBTOTAL of Receipts This Page (optional)	▶	135.56
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 89 / 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) DAVID J SCHWARTZER		Date of Receipt
	Mailing Address 1911 205TH PL NE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 14 / 2008
	City	State	Zip Code
	SAMMAMISH	WA	98074
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-473368
Name of Employer Allstate Insurance Company		Occupation Assistant Field Vice Pres	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 47.08
		<input type="text"/> 277.83	

B.	Full Name (Last, First, Middle Initial) DAVID J SCHWARTZER		Date of Receipt
	Mailing Address 1911 205TH PL NE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	SAMMAMISH	WA	98074
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-538406
Name of Employer Allstate Insurance Company		Occupation Assistant Field Vice Pres	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 47.08
		<input type="text"/> 324.91	

C.	Full Name (Last, First, Middle Initial) STACY Y SHARPE		Date of Receipt
	Mailing Address 2 E. Erie #1506		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 14 / 2008
	City	State	Zip Code
	Chicago	IL	60611
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-473304
Name of Employer Allstate Insurance Company		Occupation Communication Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 35.81
		<input type="text"/> 203.11	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 129.97
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 90 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STACY Y SHARPE
Mailing Address 2 E. Erie #1506
City Chicago State IL Zip Code 60611
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Communication Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.92
Date of Receipt 03 / 28 / 2008
Transaction ID: A2008-538342
Amount of Each Receipt this Period 35.81

B. Full Name (Last, First, Middle Initial)
STEVEN E SHEBIK
Mailing Address 517 ROBINWOOD LANE
City WHEATON State IL Zip Code 60187
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Property/C
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.59
Date of Receipt 03 / 14 / 2008
Transaction ID: A2008-473271
Amount of Each Receipt this Period 81.89

C. Full Name (Last, First, Middle Initial)
STEVEN E SHEBIK
Mailing Address 517 ROBINWOOD LANE
City WHEATON State IL Zip Code 60187
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Property/C
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 557.48
Date of Receipt 03 / 28 / 2008
Transaction ID: A2008-538309
Amount of Each Receipt this Period 81.89

SUBTOTAL of Receipts This Page (optional) ► 199.59
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 91 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) ROBERT L SIMMONS		Date of Receipt
	Mailing Address 418 DEUCE DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	WALL	NJ	07719
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538131
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.71	29.43

B.	Full Name (Last, First, Middle Initial) KIMBALL S SIMON		Date of Receipt
	Mailing Address 11 WEHRHEIM		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 14 / 2008
	City	State	Zip Code
	BARRINGTON	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-473424
Name of Employer Allstate Insurance Company		Occupation CC IT Systems Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 218.36	37.16

C.	Full Name (Last, First, Middle Initial) KIMBALL S SIMON		Date of Receipt
	Mailing Address 11 WEHRHEIM		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	BARRINGTON	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: A2008-538462
Name of Employer Allstate Insurance Company		Occupation CC IT Systems Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.52	37.16

SUBTOTAL of Receipts This Page (optional)	103.75
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 / 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) KEVIN R SLAWIN	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 1316 CRESTWOOD DRIVE	Transaction ID: A2008-473313
	City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 41.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP AF Admin Serv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00

B.	Full Name (Last, First, Middle Initial) KEVIN R SLAWIN	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 1316 CRESTWOOD DRIVE	Transaction ID: A2008-538351
	City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 41.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP AF Admin Serv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.00

C.	Full Name (Last, First, Middle Initial) KIMBERLY J SLOANE	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 378 N. VISTA AVE	Transaction ID: A2008-473293
	City State Zip Code LOMBARD IL 60148	Amount of Each Receipt this Period 39.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Claim Reserve Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.52

SUBTOTAL of Receipts This Page (optional)	▶	121.77
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 93 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 378 N. VISTA AVE

City State Zip Code
LOMBARD IL 60148

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

Name of Employer Allstate Insurance Company Occupation Claim Reserve Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 271.29

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538331

Amount of Each Receipt this Period
39.77

B. Full Name (Last, First, Middle Initial)
CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.28

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538411

Amount of Each Receipt this Period
33.04

C. Full Name (Last, First, Middle Initial)
J E SMITH

Mailing Address 310 WHITMORE LANE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation VP Distribution and Chann

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 354.91

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473274

Amount of Each Receipt this Period
61.11

SUBTOTAL of Receipts This Page (optional) ► **133.92**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 142
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
J E SMITH

Mailing Address 310 WHITMORE LANE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation VP Distribution and Chann

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.02

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538312

Amount of Each Receipt this Period
61.11

B.

Full Name (Last, First, Middle Initial)
RANDALL D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City State Zip Code
Scottsdale AZ 85262

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

Name of Employer Allstate Insurance Company Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.80

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538451

Amount of Each Receipt this Period
29.90

C.

Full Name (Last, First, Middle Initial)
STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 453.97

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473360

Amount of Each Receipt this Period
78.17

SUBTOTAL of Receipts This Page (optional) ► **169.18**

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 95 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 532.14

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538398

Amount of Each Receipt this Period
78.17

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

Mailing Address 1663 SARATOGA LANE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Allstate Insurance Company Occupation AVP Account Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 217.29

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538373

Amount of Each Receipt this Period
31.92

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

Mailing Address 740 AMBRIA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Allstate Insurance Company Occupation Human Resource Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.91

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473118

Amount of Each Receipt this Period
36.26

SUBTOTAL of Receipts This Page (optional) ► **146.35**

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 96 / 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 740 AMBRIA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Allstate Insurance Company Occupation Human Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.17

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538156

Amount of Each Receipt this Period
36.26

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

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.47

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473178

Amount of Each Receipt this Period
44.37

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

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 293.84

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538217

Amount of Each Receipt this Period
44.37

SUBTOTAL of Receipts This Page (optional) ► 125.00

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

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

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

FOR LINE NUMBER: PAGE 97 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

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

Name of Employer Allstate Insurance Company Occupation AVP Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 233.54

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473143

Amount of Each Receipt this Period
39.89

B.

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

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

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

Name of Employer Allstate Insurance Company Occupation AVP Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 273.43

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538181

Amount of Each Receipt this Period
39.89

C.

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

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.70

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473153

Amount of Each Receipt this Period
39.00

SUBTOTAL of Receipts This Page (optional) ▶

118.78

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GARY 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 Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.70

Date of Receipt: 03 / 28 / 2008
Transaction ID: A2008-538192
 Amount of Each Receipt this Period: 39.00

B. Full Name (Last, First, Middle Initial)
KEVIN T SULLIVAN

Mailing Address 221 CARRIAGE HILL CIR

City LIBERTYVILLE State IL Zip Code 60048

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.07

Date of Receipt: 03 / 14 / 2008
Transaction ID: A2008-473427
 Amount of Each Receipt this Period: 97.37

C. Full Name (Last, First, Middle Initial)
KEVIN T SULLIVAN

Mailing Address 221 CARRIAGE HILL CIR

City LIBERTYVILLE State IL Zip Code 60048

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 667.44

Date of Receipt: 03 / 28 / 2008
Transaction ID: A2008-538465
 Amount of Each Receipt this Period: 97.37

SUBTOTAL of Receipts This Page (optional) ► 233.74

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 99 / 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) KATHLEEN A SWAIN		Date of Receipt
	Mailing Address 242 HIGHVIEW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 14 / 2008
	City	State	Zip Code
	ELMHURST	IL	60126
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-473205
Name of Employer Allstate Insurance Company		Occupation AVP Enterprise Applicatio	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.05	<input type="text"/> 55.75

B.	Full Name (Last, First, Middle Initial) KATHLEEN A SWAIN		Date of Receipt
	Mailing Address 242 HIGHVIEW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 28 / 2008
	City	State	Zip Code
	ELMHURST	IL	60126
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-538244
Name of Employer Allstate Insurance Company		Occupation AVP Enterprise Applicatio	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 380.80	<input type="text"/> 55.75

C.	Full Name (Last, First, Middle Initial) JERROLD S SZOSTAK		Date of Receipt
	Mailing Address 1064 W GLENN TRAIL		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 14 / 2008
	City	State	Zip Code
	ELK GROVE	IL	60007
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-473248
Name of Employer Allstate Insurance Company		Occupation Claim Reserve Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 226.19	<input type="text"/> 38.64

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.14
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City State Zip Code
ELK GROVE IL 60007

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

Name of Employer Allstate Insurance Company Occupation Claim Reserve Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.83

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538286

Amount of Each Receipt this Period
38.64

B.

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

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.91

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473140

Amount of Each Receipt this Period
38.91

C.

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

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 268.82

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538178

Amount of Each Receipt this Period
38.91

SUBTOTAL of Receipts This Page (optional) ► 116.46

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 142
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP ENCOMPASS FIELD DISTR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.90

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473429

Amount of Each Receipt this Period
40.75

B.

Full Name (Last, First, Middle Initial)
LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP ENCOMPASS FIELD DISTR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.65

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538467

Amount of Each Receipt this Period
40.75

C.

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

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP Agency Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.12

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473386

Amount of Each Receipt this Period
47.07

SUBTOTAL of Receipts This Page (optional) ► 128.57

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

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

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

FOR LINE NUMBER: PAGE 102 / 142
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP Agency Operations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 316.19

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

Transaction ID: A2008-538424

Amount of Each Receipt this Period
47.07

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

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 311.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: A2008-473268

Amount of Each Receipt this Period
53.99

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

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 365.53

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

Transaction ID: A2008-538306

Amount of Each Receipt this Period
53.99

SUBTOTAL of Receipts This Page (optional) ► **155.05**

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 103 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation Claims Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.90

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538243

Amount of Each Receipt this Period
32.70

B.

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

Mailing Address 9868 PALACE GREEN WAY

City State Zip Code
VIENNA VA 22181

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.16

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473423

Amount of Each Receipt this Period
55.77

C.

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

Mailing Address 9868 PALACE GREEN WAY

City State Zip Code
VIENNA VA 22181

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.93

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538461

Amount of Each Receipt this Period
55.77

SUBTOTAL of Receipts This Page (optional) ► 144.24

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) RICHARD VAVRA	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 2514 S WESLEY AVENUE	Transaction ID: A2008-473196
	City State Zip Code BERWYN IL 60402	Amount of Each Receipt this Period 39.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.81

B.	Full Name (Last, First, Middle Initial) RICHARD VAVRA	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 2514 S WESLEY AVENUE	Transaction ID: A2008-538235
	City State Zip Code BERWYN IL 60402	Amount of Each Receipt this Period 39.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.42

C.	Full Name (Last, First, Middle Initial) MICHAEL J VELOTTA	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 1111 LOYOLA DR	Transaction ID: A2008-473388
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 77.04
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Sec & Gene Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.24

SUBTOTAL of Receipts This Page (optional)	156.26
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 142

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
MICHAEL J VELOTTA

Mailing Address 1111 LOYOLA DR

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Vice President Sec & Gene

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 539.28

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538426

Amount of Each Receipt this Period

77.04

B.

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

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Occupation
Allstate Insurance Company Vice President & Treasure

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 407.22

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473086

Amount of Each Receipt this Period

70.12

C.

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

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Occupation
Allstate Insurance Company Vice President & Treasure

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 477.34

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538124

Amount of Each Receipt this Period

70.12

SUBTOTAL of Receipts This Page (optional) ▶

217.28

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JOAN H WALKER	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 850 N. Riverwoods Road	Transaction ID: A2008-473465
	City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 51.51
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Corp. Rel. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 286.46	

B.	Full Name (Last, First, Middle Initial) JOAN H WALKER	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 850 N. Riverwoods Road	Transaction ID: A2008-538503
	City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 48.12
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Corp. Rel. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 334.58	

C.	Full Name (Last, First, Middle Initial) ANTON WANDERON	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 112 BRISTOL PLAGE	Transaction ID: A2008-473152
	City State Zip Code PONTE VEDRA FL 32082	Amount of Each Receipt this Period 63.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation DIRECTOR CREDIT DEPARTMEN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 380.76	

SUBTOTAL of Receipts This Page (optional)	▶	163.09
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 107 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

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

Name of Employer Allstate Insurance Company Occupation DIRECTOR CREDIT DEPARTMEN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 444.22

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538191

Amount of Each Receipt this Period
63.46

B.

Full Name (Last, First, Middle Initial)
THOMAS M WARDEN

Mailing Address 146 LA GRANDE

City State Zip Code
MOSS BEACH CA 94038

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

Name of Employer Allstate Insurance Company Occupation AVP Research Center

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.64

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538203

Amount of Each Receipt this Period
33.52

C.

Full Name (Last, First, Middle Initial)
EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation Procurement Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.83

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473339

Amount of Each Receipt this Period
36.48

SUBTOTAL of Receipts This Page (optional) ► 133.46

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation Procurement Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.31

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538377

Amount of Each Receipt this Period
36.48

B.

Full Name (Last, First, Middle Initial)
DOUGLAS B WELCH

Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Allstate Insurance Company Occupation Vice President Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 334.91

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473185

Amount of Each Receipt this Period
57.21

C.

Full Name (Last, First, Middle Initial)
DOUGLAS B WELCH

Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Allstate Insurance Company Occupation Vice President Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 392.12

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538224

Amount of Each Receipt this Period
57.21

SUBTOTAL of Receipts This Page (optional) ► **150.90**

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 109 / 142		
	<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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JONATHAN J WELLS	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 5394 W RIVER BEND DRIVE	Transaction ID: A2008-538449
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 32.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Bank Cash Management Dire Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.70	

B.	Full Name (Last, First, Middle Initial) ROBERT J WHITE	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 909 STILLWATER COURT	Transaction ID: A2008-473103
	City State Zip Code WESTON FL 33327	Amount of Each Receipt this Period 34.87
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Territorial Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 204.12	

C.	Full Name (Last, First, Middle Initial) ROBERT J WHITE	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 909 STILLWATER COURT	Transaction ID: A2008-538141
	City State Zip Code WESTON FL 33327	Amount of Each Receipt this Period 34.87
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Territorial Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.99	

SUBTOTAL of Receipts This Page (optional)	101.94
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 110 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 120 NE STONELEDGE PLACE

City State Zip Code
LEESBURG VA 20176

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 ▼ 216.15

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538439

Amount of Each Receipt this Period

31.75

B.

Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 227.05

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473142

Amount of Each Receipt this Period

39.10

C.

Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 266.15

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538180

Amount of Each Receipt this Period

39.10

SUBTOTAL of Receipts This Page (optional) ▶

109.95

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 1120 JESSICA LANE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Product Operations Direct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.92

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538257

Amount of Each Receipt this Period
32.96

B.

Full Name (Last, First, Middle Initial)
ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation Human Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473430

Amount of Each Receipt this Period
47.65

C.

Full Name (Last, First, Middle Initial)
ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation Human Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.65

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538468

Amount of Each Receipt this Period
47.65

SUBTOTAL of Receipts This Page (optional) ► 128.26

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 7104 CHARDON COURT

City State Zip Code
CLARKSVILLE MD 21029

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.78

Date of Receipt
MM / DD / YYYY
03 / 14 / 2008

Transaction ID: A2008-473251

Amount of Each Receipt this Period
39.93

B.

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

Mailing Address 7104 CHARDON COURT

City State Zip Code
CLARKSVILLE MD 21029

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 273.71

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538289

Amount of Each Receipt this Period
39.93

C.

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

Mailing Address 2024 N. MOHAWK

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation President & COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1352.32

Date of Receipt
MM / DD / YYYY
03 / 14 / 2008

Transaction ID: A2008-473358

Amount of Each Receipt this Period
244.62

SUBTOTAL of Receipts This Page (optional) ▶ **324.48**

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 113 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 2024 N. MOHAWK

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation President & COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1596.94

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538396

Amount of Each Receipt this Period
244.62

B.

Full Name (Last, First, Middle Initial)
MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior Field Operations M

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 217.70

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-538126

Amount of Each Receipt this Period
32.30

C.

Full Name (Last, First, Middle Initial)
RHONDA WOODARD

Mailing Address 2341 MARCY AVENUE

City State Zip Code
EVANSTON IL 60201

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

Name of Employer Allstate Insurance Company Occupation VP-PRODUCT DELIVERY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.14

Date of Receipt
MM / DD / YYYY
03 / 14 / 2008

Transaction ID: A2008-473421

Amount of Each Receipt this Period
35.94

SUBTOTAL of Receipts This Page (optional) ► **312.86**

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 114 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
RHONDA WOODARD

Mailing Address 2341 MARCY AVENUE

City State Zip Code
EVANSTON IL 60201

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

Name of Employer Allstate Insurance Company Occupation VP-PRODUCT DELIVERY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.08

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538459

Amount of Each Receipt this Period
35.94

B.

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

Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 209.52

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473223

Amount of Each Receipt this Period
36.07

C.

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

Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.59

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538262

Amount of Each Receipt this Period
36.07

SUBTOTAL of Receipts This Page (optional) ► **108.08**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

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

Name of Employer Allstate Insurance Company Occupation Assistant Field Vice Pres

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.19

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473292

Amount of Each Receipt this Period
49.89

B.

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

Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

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

Name of Employer Allstate Insurance Company Occupation Assistant Field Vice Pres

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.08

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2008

Transaction ID: A2008-538330

Amount of Each Receipt this Period
49.89

C.

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

Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

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

Name of Employer Allstate Insurance Company Occupation AVP Procurement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.66

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2008

Transaction ID: A2008-473300

Amount of Each Receipt this Period
52.46

SUBTOTAL of Receipts This Page (optional) ► 152.24

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 / 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) LORI J YELVINGTON	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 1531 N HIGHLAND AVE	Transaction ID: A2008-538338
	City State Zip Code ARLINGTON HGTS. IL 60004	Amount of Each Receipt this Period 52.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Procurement Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 357.12	

B.	Full Name (Last, First, Middle Initial) RICHARD P YOCIUS	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 40135 N GOLDENROD	Transaction ID: A2008-473225
	City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 41.75
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior State Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.50	

C.	Full Name (Last, First, Middle Initial) RICHARD P YOCIUS	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 40135 N GOLDENROD	Transaction ID: A2008-538264
	City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 41.75
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Senior State Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 292.25	

SUBTOTAL of Receipts This Page (optional)	135.96
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 / 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) MARY E ZAGORSKI	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 2609 N PINE AVE	Transaction ID: A2008-538328
	City State Zip Code ARLINGTON HEIGHTS IL 60004	Amount of Each Receipt this Period 34.11
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Personal Lines Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.77

B.	Full Name (Last, First, Middle Initial) RICHARD M ZAHARIAS	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address 1439 STEVENSON DRIVE	Transaction ID: A2008-473372
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 67.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Allstate Life Service Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.09

C.	Full Name (Last, First, Middle Initial) RICHARD M ZAHARIAS	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 1439 STEVENSON DRIVE	Transaction ID: A2008-538410
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 67.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Allstate Life Service Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.38

SUBTOTAL of Receipts This Page (optional)	168.69
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 / 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) GERALD L ZIMMERMAN JR		Date of Receipt
	Mailing Address 2584 Sutton Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	AURORA	IL	60502
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-473363
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	<input type="text"/> 37.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 217.50	

B.	Full Name (Last, First, Middle Initial) GERALD L ZIMMERMAN JR		Date of Receipt
	Mailing Address 2584 Sutton Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	AURORA	IL	60502
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-538401
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	<input type="text"/> 37.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 255.25	

C.	Full Name (Last, First, Middle Initial) J K ZUZICH		Date of Receipt
	Mailing Address 1125 ACORN TRAIL		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee.		Transaction ID: A2008-473417
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Allstate Insurance Company		Occupation AVP HR People Planning &	<input type="text"/> 35.83
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 211.48	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 111.33
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 119 / 142
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City	State	Zip Code
LAKE FOREST	IL	60045

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

Name of Employer Allstate Insurance Company	Occupation AVP HR People Planning &
--	--

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

247.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

Transaction ID: A2008-538455

Amount of Each Receipt this Period

35.83

SUBTOTAL of Receipts This Page (optional)	▶	35.83
TOTAL This Period (last page this line number only)	▶	18445.35

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

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

FOR LINE NUMBER:
(check only one)

PAGE 120 / 142

<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

A.

Full Name (Last, First, Middle Initial)
Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement
March 2008 bank charge.

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District:

Not Applicable

Transaction ID: B211886

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

208.05

SUBTOTAL of Disbursements This Page (optional)

208.05

TOTAL This Period (last page this line number only)

208.05

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

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

FOR LINE NUMBER:
(check only one)

PAGE 121 / 142

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) Friends of Rahm Emanuel	Transaction ID: B210059
	Mailing Address PO Box 101124	Date of Disbursement 03 / 06 / 2008
	City Chicago State IL Zip Code 60610	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Contribution Candidate Name Rahm Emanuel	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Christopher Shays for Congress Cmte.	Transaction ID: B210060
	Mailing Address 98 East Avenue Rear Bldg.	Date of Disbursement 03 / 06 / 2008
	City Norwalk State CT Zip Code 06851	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Christopher Shays	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ellen Tauscher for Congress	Transaction ID: B210058
	Mailing Address 422 C Street NE Lower Lever	Date of Disbursement 03 / 06 / 2008
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Ellen O Tauscher	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
Davis for Congress

Transaction ID: B210174
Date of Disbursement

Mailing Address PO Box 2842

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	8

City Washington State DC Zip Code 20013

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Danny K Davis

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: IL District: 07

B.

Full Name (Last, First, Middle Initial)
Elizabeth Dole Committee Inc.

Transaction ID: B210175
Date of Disbursement

Mailing Address 128 North Columbus Street

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	8

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Elizabeth Dole

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: NC District:

C.

Full Name (Last, First, Middle Initial)
Knollenberg for Congress

Transaction ID: B210176
Date of Disbursement

Mailing Address 2501 Wisconsin Ave. NW Suite 304

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	8

City Washington State DC Zip Code 20007

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Joe Knollenberg

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: MI District: 09

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Cmte. <hr/> Mailing Address 120 Maryland Avenue NE <hr/> City Washington State DC Zip Code 20002 Purpose of Disbursement Contribution Candidate Name	Transaction ID: B210627 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2008
	Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	011 Category/ Type

B. Full Name (Last, First, Middle Initial) Red PAC <hr/> Mailing Address 104 Hume Ave. <hr/> City Alexandria State VA Zip Code 22301 Purpose of Disbursement Contribution Candidate Name	Transaction ID: B210622 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2008
	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	011 Category/ Type

C. Full Name (Last, First, Middle Initial) Bob Goodlatte for Congress <hr/> Mailing Address P.O. Box 3591 <hr/> City Alexandria State VA Zip Code 22302 Purpose of Disbursement Contribution Candidate Name Bob Goodlatte	Transaction ID: B210623 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2008
	Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

<p>A. Full Name (Last, First, Middle Initial) Pennsylvanians for Kanjorski</p> <p>Mailing Address 233 Massachusetts Ave. NE 2nd Flr.</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Paul E Kanjorski</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: PA District: 11</p>	<p>Transaction ID: B210626 Date of Disbursement 03 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Mary Landrieu</p> <p>Mailing Address 10 G Street NE Suite 470</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Mary L Landrieu</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: LA District:</p>	<p>Transaction ID: B210625 Date of Disbursement 03 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Neugebauer Congressional Committee</p> <p>Mailing Address 217 3rd Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Randy R Neugebauer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TX District: 19</p>	<p>Transaction ID: B210624 Date of Disbursement 03 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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)

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<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

<p>A. Full Name (Last, First, Middle Initial) People for English</p> <p>Mailing Address 104 Hume Avenue</p> <p>City Alexandria State VA Zip Code 22301</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Philip S English</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 03</p>	<p>Transaction ID: B211599 Date of Disbursement: <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	1		2	0	0	8													
1000.00																						
<p>B. Full Name (Last, First, Middle Initial) Debbie Halvorson for Congress</p> <p>Mailing Address PO Box 176</p> <p>City Crete State IL Zip Code 60417</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Debbie Halvorson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 11</p>	<p>Transaction ID: B211601 Date of Disbursement: <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	1		2	0	0	8													
1000.00																						
<p>C. Full Name (Last, First, Middle Initial) Royce Campaign Cmte.</p> <p>Mailing Address 217 3rd Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Ed Royce</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 40</p>	<p>Transaction ID: B211602 Date of Disbursement: <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	1		2	0	0	8													
1000.00																						

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	18000.00

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)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) LA Legislative Women's Caucus Mailing Address PO Box 44188 City Baton Rouge State LA Zip Code 70804 Purpose of Disbursement O-2008 State PAC LA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B209839 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 1500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Taxfighters for Anderson 08 ID#1294772 Mailing Address 1127 11th Street Suite 310 City Sacramento State CA Zip Code 95814 Purpose of Disbursement P-2008 State House 77 CA Candidate Name Joel Anderson Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B209930 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 500.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Friends of John J. Benoit ID#1293454 Mailing Address 1201 K Street Suite 1820 City Sacramento State CA Zip Code 95814 Purpose of Disbursement P-2008 State Senate 37 CA Candidate Name John J Benoit Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B209929 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 600.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) Taxpayers for Dave Cox - Senate 2008	Transaction ID: B209927
	Mailing Address 4010 Riva Ridge Drive	Date of Disbursement MM / DD / YYYY 03 / 04 / 2008
	City Fair Oaks State CA Zip Code 95628	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement G-2008 State Senate 01 CA Candidate Name Dave Cox	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mike Duvall for Assembly 2008 ID#1293104	Transaction ID: B209925
	Mailing Address PO Box 471	Date of Disbursement MM / DD / YYYY 03 / 04 / 2008
	City Sacramento State CA Zip Code 95812	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement P-2008 State House 72 CA Candidate Name Mike Duvall	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Garrick for Assembly 2008 ID#1294234	Transaction ID: B209924
	Mailing Address P.O. Box 471	Date of Disbursement MM / DD / YYYY 03 / 04 / 2008
	City Sacramento State CA Zip Code 95812	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement P-2008 State House 74 CA Candidate Name Martin W Garrick	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Friends of Lloyd Levine ID# 1278106

Mailing Address 1201 K Street Suite 1820

City Sacramento State CA Zip Code 95814

Purpose of Disbursement P-2008 State Senate 23 CA

Candidate Name Lloyd Levine

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: B209923
Date of Disbursement: 03 / 04 / 2008

Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

B. Full Name (Last, First, Middle Initial)
John J. Hines for State Senate

Mailing Address 714 West Echeta Road

City Gillette State WY Zip Code 82716

Purpose of Disbursement P-2010 State Senate 23 WY

Candidate Name John J Hines

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B195826
Date of Disbursement: 03 / 05 / 2008

Amount of Each Disbursement this Period: -250.00

Category/Type: 011

Check Voided. Check dated 10/02/07.

C. Full Name (Last, First, Middle Initial)
Colin Simpson for House Dist. #24 Cmte.

Mailing Address 201 Rio Vista Avenue

City Cody State WY Zip Code 82414

Purpose of Disbursement P-2008 State House 24 WY

Candidate Name Colin Simpson

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: B195822
Date of Disbursement: 03 / 05 / 2008

Amount of Each Disbursement this Period: -250.00

Category/Type: 011

Check Voided. Check dated 10/02/07.

SUBTOTAL of Disbursements This Page (optional) ▶ 500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) Citizens for Vincent Hughes Mailing Address PO Box 13031 City Philadelphia State PA Zip Code 19101 Purpose of Disbursement G-2008 State Senate 07 PA Candidate Name Vincent Hughes Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210158 Date of Disbursement 03 / 07 / 2008 Amount of Each Disbursement this Period 500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Friends of Nick Micozzie Mailing Address P.O. Box 234 City Clifton Heights State PA Zip Code 19018 Purpose of Disbursement G-2008 State House 163 PA Candidate Name Nicholas A Micozzie Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210159 Date of Disbursement 03 / 07 / 2008 Amount of Each Disbursement this Period 500.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Friends of John Pippy Mailing Address P.O. Box 792 City Harrisburg State PA Zip Code 17108 Purpose of Disbursement G-2008 State Senate 37 PA Candidate Name John Pippy Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210161 Date of Disbursement 03 / 07 / 2008 Amount of Each Disbursement this Period 500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

<p>A. Full Name (Last, First, Middle Initial) Aghazarian for Senate ID#1297115</p> <p>Mailing Address P.O. Box 471</p> <p>City Sacramento State CA Zip Code 95812</p> <p>Purpose of Disbursement P-2008 State Senate 5 CA</p> <p>Candidate Name Greg Aghazarian</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B210177</p> <p>Date of Disbursement MM / DD / YYYY 03 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Mike Feuer for Assembly 2008 #1292457</p> <p>Mailing Address 419 N. Larchmont Blvd. #37</p> <p>City Los Angeles State CA Zip Code 90004</p> <p>Purpose of Disbursement P-2008 State House 42 CA</p> <p>Candidate Name Mike Feuer</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B210178</p> <p>Date of Disbursement MM / DD / YYYY 03 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Rick Keene ID#1292551</p> <p>Mailing Address P.O. Box 984</p> <p>City Willows State CA Zip Code 95988</p> <p>Purpose of Disbursement P-2010 State Senate 4 CA</p> <p>Candidate Name Rick Keene</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B210179</p> <p>Date of Disbursement MM / DD / YYYY 03 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

<p>A. Full Name (Last, First, Middle Initial) George Runner for Senate-2008 #1272115</p> <p>Mailing Address PO Box 471</p> <p>City Sacramento State CA Zip Code 95812</p> <p>Purpose of Disbursement P-2008 State Senate 17 CA</p> <p>Candidate Name George Runner</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210180 Date of Disbursement 03 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Sen. Machado Legal Def. Fund ID#1272154</p> <p>Mailing Address PO Box 1290</p> <p>City Stockton State CA Zip Code 95201</p> <p>Purpose of Disbursement O-2008 Legal Defense Fund - State CA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B210315 Date of Disbursement 03 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Rep. Neil Abramson Campaign Fund</p> <p>Mailing Address 365 Canal Street</p> <p>City New Orleans State LA Zip Code 70130</p> <p>Purpose of Disbursement P-2011 State House 98 LA</p> <p>Candidate Name Neil Abramson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210332 Date of Disbursement 03 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) Sen. Robert Adley Campaign Fund	Transaction ID: B210323 Date of Disbursement
	Mailing Address 611 Jesse Jones Drive	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Benton State LA Zip Code 71006	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2011 State Senate 36 LA	<input type="text" value="500.00"/>
	Candidate Name Robert Adley	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Rep. Tim Burns Campaign Fund	Transaction ID: B210335 Date of Disbursement
	Mailing Address #1 Sanctuary Drive Suite 306	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Mandeville State LA Zip Code 70471	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2011 State House 89 LA	<input type="text" value="500.00"/>
	Candidate Name Tim G Burns	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Rep. Patrick Cortez Campaign Fund	Transaction ID: B210336 Date of Disbursement
	Mailing Address 111 Southwark Drive	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Lafayette State LA Zip Code 70508	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2011 State House 43 LA	<input type="text" value="500.00"/>
	Candidate Name Patrick Cortez	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Sen. Don Cravins Jr. Campaign Fund

Mailing Address 713 NW Evangeline Suite A

City Lafayette State LA Zip Code 70501

Purpose of Disbursement
P-2011 State Senate 24 LA

011
Category/
Type

Candidate Name
Donald R. (Don) Cravins, Jr.

Office Sought: House Senate President
Disbursement For: 2011 Primary General Other (specify) ▼

State: District:

Transaction ID: B210325
Date of Disbursement

03 / 12 / 2008

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Sen. A. G. Crowe Campaign Fund

Mailing Address 195 Strawberry St.

City Slidell State LA Zip Code 70460

Purpose of Disbursement
P-2011 State Senate 1 LA

011
Category/
Type

Candidate Name
A.G. Crowe

Office Sought: House Senate President
Disbursement For: 2011 Primary General Other (specify) ▼

State: District:

Transaction ID: B210326
Date of Disbursement

03 / 12 / 2008

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Sen. Jack Donahue Campaign Fund

Mailing Address PO Box 896

City Mandeville State LA Zip Code 70470

Purpose of Disbursement
P-2011 State Senate 11 LA

011
Category/
Type

Candidate Name
Jack Donahue

Office Sought: House Senate President
Disbursement For: 2011 Primary General Other (specify) ▼

State: District:

Transaction ID: B210327
Date of Disbursement

03 / 12 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

<p>A. Full Name (Last, First, Middle Initial) Sen. Ann Duplessis Campaign Fund</p> <p>Mailing Address 6600 Plaza Dr. Suite 211A</p> <p>City New Orleans State LA Zip Code 70127</p> <p>Purpose of Disbursement P-2011 State Senate 02 LA</p> <p>Candidate Name Ann Duplessis</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210328 Date of Disbursement 03 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Rep. Franklin Foil Campaign Fund</p> <p>Mailing Address 320 Somerulos Street</p> <p>City Baton Rouge State LA Zip Code 70802</p> <p>Purpose of Disbursement P-2011 State House 70 LA</p> <p>Candidate Name Franklin Foil</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210337 Date of Disbursement 03 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Sen. David Heitmeier Campaign Fund</p> <p>Mailing Address 3501 Holiday Drive Suite 225</p> <p>City New Orleans State LA Zip Code 70114</p> <p>Purpose of Disbursement P-2011 State Senate 07 LA</p> <p>Candidate Name Francis C Heitmeier</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210329 Date of Disbursement 03 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rep. Charles Kleckley Campaign Fund</p> <p>Mailing Address 130 Jamestown Road</p> <p>City Lake Charles State LA Zip Code 70605</p> <p>Purpose of Disbursement P-2011 State House 36 LA</p> <p>Candidate Name Charles (Chuck) Kleckley</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210338</p> <p>Date of Disbursement 03 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Sen. Dan Morrish Campaign Fund</p> <p>Mailing Address 119 West Nezpique</p> <p>City Jennings State LA Zip Code 70546</p> <p>Purpose of Disbursement P-2011 State Senate 25 LA</p> <p>Candidate Name Blade Morrish</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210330</p> <p>Date of Disbursement 03 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rep. Kevin Pearson Campaign Fund</p> <p>Mailing Address 620 Oak Harbor Blvd. Ste. 203</p> <p>City Slidell State LA Zip Code 70458</p> <p>Purpose of Disbursement P-2011 State House 76 LA</p> <p>Candidate Name Kevin Pearson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210339</p> <p>Date of Disbursement 03 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) Rep. Kirk Talbot Campaign Fund <hr/> Mailing Address 9523 Jefferson Hwy. Suite B <hr/> City River Ridge State LA Zip Code 70123 <hr/> Purpose of Disbursement P-2011 State House 78 LA Candidate Name Kirk Talbot <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210340 Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2008
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sharon Weston Broome Campaign Fund <hr/> Mailing Address P.O. Box 52783 <hr/> City Baton Rouge State LA Zip Code 70892 <hr/> Purpose of Disbursement P-2011 State Senate 15 LA Candidate Name Sharon Weston Broome <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210324 Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2008
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Tom McVea Campaign Fund <hr/> Mailing Address PO Box 217 <hr/> City Jackson State LA Zip Code 70748 <hr/> Purpose of Disbursement P-2011 State Senate 32 LA Candidate Name Tom McVea <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210621 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2008
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) Gerald Long Campaign Fund <hr/> Mailing Address PO Box 151 <hr/> City Winnfield State LA Zip Code 71483 <hr/> Purpose of Disbursement P-2011 State Senate 31 LA Candidate Name Gerald Long Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210969 Date of Disbursement 03 / 20 / 2008 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Rep. Nick Lorusso Campaign Fund <hr/> Mailing Address 3535 Canal St. Suite 103 <hr/> City New Orleans State LA Zip Code 70119 <hr/> Purpose of Disbursement P-2011 State House 94 LA Candidate Name Nick Lorusso Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210976 Date of Disbursement 03 / 20 / 2008 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Fred H. Mills Jr. Campaign <hr/> Mailing Address 1010 Moutin St. <hr/> City Parks State LA Zip Code 70582 <hr/> Purpose of Disbursement P-2011 State House 46 LA Candidate Name Fred H Mills, Jr. Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210973 Date of Disbursement 03 / 20 / 2008 <hr/> Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) Erich Ponti Campaign Fund <hr/> Mailing Address 7341 Jefferson Hwy, Ste. J <hr/> City Baton Rouge State LA Zip Code 70806 Purpose of Disbursement P-2011 State House 69 LA Candidate Name Erich Ponti Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210974 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cmte to Elect Julie Quinn <hr/> Mailing Address 3300 N. Causeway Blvd. #438 <hr/> City Metairie State LA Zip Code 70002 Purpose of Disbursement P-2011 State Senate 06 LA Candidate Name Julie Quinn Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210972 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	Category/Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Rep. Cliff Richardson Campaign Fund <hr/> Mailing Address 9432 Joor Rd. <hr/> City Baton Rouge State LA Zip Code 70818 Purpose of Disbursement P-2011 State House 65 LA Candidate Name Cliff Richardson Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B210975 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) Neil Riser Campaign Fund	Transaction ID: B210971 Date of Disbursement
	Mailing Address 216 Main St.	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City Columbia State LA Zip Code 71418	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2011 State Senate 32 LA	<input type="text" value="250.00"/>
	Candidate Name Neil Riser	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Michael A. Walsworth Campaign Fund	Transaction ID: B210970 Date of Disbursement
	Mailing Address 1505 North 7th St.	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City West Monroe State LA Zip Code 71291	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2011 State Senate 33 LA	<input type="text" value="1000.00"/>
	Candidate Name Michael A Walsworth	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Committee to Elect David Wysong	Transaction ID: B195589 Date of Disbursement
	Mailing Address 6630 Indian Lane	<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City Mission Hills State KS Zip Code 66208	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2008 State Senate 07 KS	<input type="text" value="-250.00"/>
	Candidate Name David Wysong	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Check Voided. Check dated 09/27/07.
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) Jim Tucker Campaign Fund	Transaction ID: B211179 Date of Disbursement 03 / 24 / 2008
	Mailing Address 735 Behrman Highway Ste. C-2	Amount of Each Disbursement this Period 1000.00
	City Terrytown State LA Zip Code 70056	
	Purpose of Disbursement P-2011 State Senate 7 LA	011 Category/Type
	Candidate Name Jim Tucker	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
B.	Full Name (Last, First, Middle Initial) Friends of John J. Benoit ID#1293454	Transaction ID: B211259 Date of Disbursement 03 / 26 / 2008
	Mailing Address 2150 River Plaza Dr. Suite 150	Amount of Each Disbursement this Period 1900.00
	City Sacramento State CA Zip Code 95833	
	Purpose of Disbursement G-2008 State Senate 37 CA	011 Category/Type
	Candidate Name John J Benoit	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
C.	Full Name (Last, First, Middle Initial) Ted Gaines for Assembly '08 #1293157	Transaction ID: B211266 Date of Disbursement 03 / 26 / 2008
	Mailing Address P.O. Box 471	Amount of Each Disbursement this Period 500.00
	City Sacramento State CA Zip Code 95812	
	Purpose of Disbursement P-2008 State House 04 CA	011 Category/Type
	Candidate Name Ted Gaines	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

3400.00

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)

PAGE 141 / 142

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

<p>A. Full Name (Last, First, Middle Initial) Taxpayers for Hollingsworth ID#1295870</p> <p>Mailing Address PO Box 471</p> <p>City Sacramento State CA Zip Code 95812</p> <p>Purpose of Disbursement O-2012 State House 66 CA</p> <p>Candidate Name Dennis Hollingsworth</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Office Holder Account</p>	<p>Transaction ID: B211278 Date of Disbursement 03 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Brian Nestande for Assembly ID#1301936</p> <p>Mailing Address PO Box 471</p> <p>City Sacramento State CA Zip Code 95812</p> <p>Purpose of Disbursement P-2008 State House 64 CA</p> <p>Candidate Name Brian Nestande</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B211279 Date of Disbursement 03 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Yee for Senate ID#1294887</p> <p>Mailing Address 1005 12th Street Ste. H</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2010 State Senate 08 CA</p> <p>Candidate Name Leland Yee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B211262 Date of Disbursement 03 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

31500.00

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.