

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 X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 05 01 2011 through 05 31 2011

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

Type or Print Name of Treasurer Mario Rizzo

Signature of Treasurer Electronically Filed by Mario Rizzo Date 06 15 2011

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)

A. Form/Schedule : **F3XN**

Transaction ID :

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		58370.76
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	43886.80									
(c) Total Receipts (from Line 19)	25739.16	130274.60								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	69625.96	188645.36								
7. Total Disbursements (from Line 31)	23962.20	142981.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	45663.76	45663.76								
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	5

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	20025.13	60066.00
(ii) Unitemized	5714.03	69400.80
(iii) TOTAL (add Lines 11(a)(i) and (ii)	25739.16	129466.80
(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)	25739.16	129466.80
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	807.80
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))	25739.16	130274.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25739.16	130274.60

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.....	97.20	571.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	97.20	571.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	11500.00	107000.00
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	41.36
(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	41.36
29. Other Disbursements.....	12365.00	35368.90
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))..	23962.20	142981.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23962.20	142981.60

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)	25739.16	129466.80
34. Total Contribution Refunds (from Line 28(d))	0.00	41.36
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25739.16	129425.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	97.20	571.34
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	807.80
38. Net Operating Expenditures (subtract Line 37 from Line 36)	97.20	-236.46

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 177
(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

<p>A. Full Name (Last, First, Middle Initial) REBECCA A ABEL</p> <p>Mailing Address 657 CORAL COURT</p> <p>City State Zip Code LINDENHURST IL 60046</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Claims Senior Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 200.38</p>	<p>Date of Receipt <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 5 / 0 6 / 2 0 1 1</td> </tr> </table> </p> <p>Transaction ID: A2011-1164907</p> <p>Amount of Each Receipt this Period 22.46</p>	M M / D D / Y Y Y Y	0 5 / 0 6 / 2 0 1 1
M M / D D / Y Y Y Y			
0 5 / 0 6 / 2 0 1 1			

<p>B. Full Name (Last, First, Middle Initial) REBECCA A ABEL</p> <p>Mailing Address 657 CORAL COURT</p> <p>City State Zip Code LINDENHURST IL 60046</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Claims Senior Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 222.84</p>	<p>Date of Receipt <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 5 / 2 0 / 2 0 1 1</td> </tr> </table> </p> <p>Transaction ID: A2011-1165318</p> <p>Amount of Each Receipt this Period 22.46</p>	M M / D D / Y Y Y Y	0 5 / 2 0 / 2 0 1 1
M M / D D / Y Y Y Y			
0 5 / 2 0 / 2 0 1 1			

<p>C. Full Name (Last, First, Middle Initial) ERNEST D ADAMS</p> <p>Mailing Address P O Box 105</p> <p>City State Zip Code Grayslake IL 60030</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Field Operations Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 200.24</p>	<p>Date of Receipt <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 5 / 2 0 / 2 0 1 1</td> </tr> </table> </p> <p>Transaction ID: A2011-1165059</p> <p>Amount of Each Receipt this Period 20.22</p>	M M / D D / Y Y Y Y	0 5 / 2 0 / 2 0 1 1
M M / D D / Y Y Y Y			
0 5 / 2 0 / 2 0 1 1			

SUBTOTAL of Receipts This Page (optional)	65.14
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 177
	<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) JONES G ADUKEH		Date of Receipt
	Mailing Address 1226 RIDGEWOOD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	LAKE VILLA	IL	60046
	FEC ID number of contributing federal political committee.		Transaction ID: A2011-1164845
		Amount of Each Receipt this Period	
		<input type="text"/> 34.03	
Name of Employer Allstate Insurance Company		Occupation Finance Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 303.59	

B.	Full Name (Last, First, Middle Initial) JONES G ADUKEH		Date of Receipt
	Mailing Address 1226 RIDGEWOOD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	LAKE VILLA	IL	60046
	FEC ID number of contributing federal political committee.		Transaction ID: A2011-1165256
		Amount of Each Receipt this Period	
		<input type="text"/> 34.03	
Name of Employer Allstate Insurance Company		Occupation Finance Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 337.62	

C.	Full Name (Last, First, Middle Initial) LORA L ADUKEH		Date of Receipt
	Mailing Address 1226 RIDGEWOOD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	LAKE VILLA	IL	60046
	FEC ID number of contributing federal political committee.		Transaction ID: A2011-1164895
		Amount of Each Receipt this Period	
		<input type="text"/> 35.70	
Name of Employer Allstate Insurance Company		Occupation Sr. Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 317.14	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 103.76
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 9 / 177
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) LORAL ADUKEH	Date of Receipt MM / DD / YYYY 05 / 20 / 2011
	Mailing Address 1226 RIDGEWOOD LANE	Transaction ID: A2011-1165306
	City State Zip Code LAKE VILLA IL 60046	Amount of Each Receipt this Period 35.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Sr. Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 352.84	

B.	Full Name (Last, First, Middle Initial) DAVID L ALLEN	Date of Receipt MM / DD / YYYY 05 / 06 / 2011
	Mailing Address 4372 Duckhorn Drive	Transaction ID: A2011-1164596
	City State Zip Code Moon Township PA 15108	Amount of Each Receipt this Period 32.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Territorial Sales Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.54	

C.	Full Name (Last, First, Middle Initial) DAVID L ALLEN	Date of Receipt MM / DD / YYYY 05 / 20 / 2011
	Mailing Address 4372 Duckhorn Drive	Transaction ID: A2011-1165006
	City State Zip Code Moon Township PA 15108	Amount of Each Receipt this Period 32.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Territorial Sales Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.88	

SUBTOTAL of Receipts This Page (optional)	▶	100.38
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 10 / 177
	(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)
AMY M ALLMON
Mailing Address 4499 Meyers Ct

City State Zip Code
Castle Rock CO 80104

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

Name of Employer Allstate Insurance Company Occupation Sales Support Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.85

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164826

Amount of Each Receipt this Period
26.21

B. Full Name (Last, First, Middle Initial)
AMY M ALLMON
Mailing Address 4499 Meyers Ct

City State Zip Code
Castle Rock CO 80104

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

Name of Employer Allstate Insurance Company Occupation Sales Support Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 258.06

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165237

Amount of Each Receipt this Period
26.21

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 ▼ 712.92

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164552

Amount of Each Receipt this Period
79.56

SUBTOTAL of Receipts This Page (optional) ► 131.98

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 177
	(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) JOHN P BADER		Date of Receipt MM / DD / YYYY 05 / 20 / 2011		
	Mailing Address 438 MITCHELL DRIVE		Transaction ID: A2011-1164962		
	City GRAYS LAKE	State IL	Zip Code 60030	Amount of Each Receipt this Period 79.56	
	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 ▼ 792.48			

B.	Full Name (Last, First, Middle Initial) DENIS BAILEY		Date of Receipt MM / DD / YYYY 05 / 20 / 2011		
	Mailing Address 8316 E. Tailfeather Dr		Transaction ID: A2011-1164964		
	City Scottsdale	State AZ	Zip Code 85255	Amount of Each Receipt this Period 21.97	
	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 ▼ 217.98			

C.	Full Name (Last, First, Middle Initial) Donald J Bailey		Date of Receipt MM / DD / YYYY 05 / 06 / 2011		
	Mailing Address 27 Kitchell Road		Transaction ID: A2011-1164944		
	City Morristown	State NJ	Zip Code 07960	Amount of Each Receipt this Period 115.38	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation President-Emerging Business			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 346.14			

SUBTOTAL of Receipts This Page (optional)	▶	216.91
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 177

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 27 Kitchell Road

City State Zip Code
Morristown NJ 07960

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

Name of Employer Occupation
Allstate Insurance Company President-Emerging Business

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 461.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165355

Amount of Each Receipt this Period

115.38

B.

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

Mailing Address 1225 W. Morse Unit 508

City State Zip Code
Chicago IL 60626

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 ▼ 260.86

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164816

Amount of Each Receipt this Period

29.34

C.

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

Mailing Address 1225 W. Morse Unit 508

City State Zip Code
Chicago IL 60626

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 ▼ 290.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165227

Amount of Each Receipt this Period

29.34

SUBTOTAL of Receipts This Page (optional) ▶

174.06

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 177

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 2 Saddle Ridge Ct.

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 356.34

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164805

Amount of Each Receipt this Period

39.94

B.

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

Mailing Address 2 Saddle Ridge Ct.

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 396.28

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165216

Amount of Each Receipt this Period

39.94

C.

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

Mailing Address 25 Blue Heron Way

City State Zip Code
Skillman NJ 08558

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

Name of Employer Occupation
Allstate Insurance Company FVP President New Jersey

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 324.58

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164612

Amount of Each Receipt this Period

36.22

SUBTOTAL of Receipts This Page (optional)

116.10

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 14 / 177

(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 BALLINGER

Mailing Address 25 Blue Heron Way

City State Zip Code
Skillman NJ 08558

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

Name of Employer Occupation
Allstate Insurance Company FVP President New Jersey

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Transaction ID: A2011-1165022

Amount of Each Receipt this Period

36.22

B.

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

Mailing Address 259 MAY AVENUE

City State Zip Code
GLEN ELLYN IL 60137

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

Name of Employer Occupation
Allstate Insurance Company AVP Allstate Financial -

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 482.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	1

Transaction ID: A2011-1164926

Amount of Each Receipt this Period

53.89

C.

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

Mailing Address 259 MAY AVENUE

City State Zip Code
GLEN ELLYN IL 60137

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

Name of Employer Occupation
Allstate Insurance Company AVP Allstate Financial -

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 536.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Transaction ID: A2011-1165337

Amount of Each Receipt this Period

53.89

SUBTOTAL of Receipts This Page (optional) ▶

144.00

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 177
(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)
PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code
HOFFMAN ESTATES IL 60192

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

Name of Employer Allstate Insurance Company Occupation Senior Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.52

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164655

Amount of Each Receipt this Period
37.80

B.

Full Name (Last, First, Middle Initial)
PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code
HOFFMAN ESTATES IL 60192

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

Name of Employer Allstate Insurance Company Occupation Senior Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 374.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165065

Amount of Each Receipt this Period
37.80

C.

Full Name (Last, First, Middle Initial)
ROBERT H BARGE III, III

Mailing Address 2222 LOCH WAY

City State Zip Code
EL DORADO HILLS CA 95762

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 662.63

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164906

Amount of Each Receipt this Period
74.27

SUBTOTAL of Receipts This Page (optional) ► **149.87**

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

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

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

FOR LINE NUMBER: PAGE 16 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT H BARGE III, III
 Mailing Address 2222 LOCH WAY
 City State Zip Code
 EL DORADO HILLS CA 95762
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 1
Transaction ID: A2011-1165317
 Amount of Each Receipt this Period
 74.27
 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 ▼ 736.90

B. Full Name (Last, First, Middle Initial)
ROBERT K BECKER
 Mailing Address 108 Sloan Road
 City State Zip Code
 West Chester PA 19382
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 6 / 2 0 1 1
Transaction ID: A2011-1164571
 Amount of Each Receipt this Period
 26.91
 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 ▼ 236.07

C. Full Name (Last, First, Middle Initial)
ROBERT K BECKER
 Mailing Address 108 Sloan Road
 City State Zip Code
 West Chester PA 19382
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 1
Transaction ID: A2011-1164981
 Amount of Each Receipt this Period
 26.91
 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 ▼ 262.98

SUBTOTAL of Receipts This Page (optional) ► 128.09
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 17 / 177
(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) DIANE BELLAS		Date of Receipt MM / DD / YYYY 05 / 06 / 2011		
	Mailing Address 1402 N. Illinois Avenue		Transaction ID: A2011-1164702		
	City Arlington Heights	State IL	Zip Code 60004	Amount of Each Receipt this Period 28.67	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation Accounting Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 253.63			

B.	Full Name (Last, First, Middle Initial) DIANE BELLAS		Date of Receipt MM / DD / YYYY 05 / 20 / 2011		
	Mailing Address 1402 N. Illinois Avenue		Transaction ID: A2011-1165112		
	City Arlington Heights	State IL	Zip Code 60004	Amount of Each Receipt this Period 21.51	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance Company	Occupation Accounting Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.14			

C.	Full Name (Last, First, Middle Initial) WALTER A BERKOWICZ		Date of Receipt MM / DD / YYYY 05 / 06 / 2011		
	Mailing Address 405 GATESHEAD DRIVE		Transaction ID: A2011-1164770		
	City NAPERVILLE	State IL	Zip Code 60565	Amount of Each Receipt this Period 33.50	
	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 ▼ 299.54			

SUBTOTAL of Receipts This Page (optional)	▶	83.68
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 177
(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)
WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code
NAPERVILLE IL 60565

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

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 333.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165181

Amount of Each Receipt this Period
33.50

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

Mailing Address 807 Greenwood Ave.

City State Zip Code
GLENCOE IL 60022

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 367.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164587

Amount of Each Receipt this Period
41.21

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

Mailing Address 807 Greenwood Ave.

City State Zip Code
GLENCOE IL 60022

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 408.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1164997

Amount of Each Receipt this Period
41.21

SUBTOTAL of Receipts This Page (optional) ► **115.92**

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 19 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID G BIEMILLER

Mailing Address 480 LEES LAKE RD

City State Zip Code
FAYETTEVILLE GA 30214

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

Name of Employer Allstate Insurance Company Occupation Frontline Process Expert

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.16

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165052

Amount of Each Receipt this Period
21.38

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 ▼ 372.96

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164846

Amount of Each Receipt this Period
42.16

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 ▼ 415.12

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165257

Amount of Each Receipt this Period
42.16

SUBTOTAL of Receipts This Page (optional) ► 105.70

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 398 Brookmont Lane

City State Zip Code
North Barrington IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Investor R

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 577.80

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164836

Amount of Each Receipt this Period
64.20

B.

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

Mailing Address 398 Brookmont Lane

City State Zip Code
North Barrington IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Investor R

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 642.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165247

Amount of Each Receipt this Period
64.20

C.

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

Mailing Address 2160 Red Setter Road

City State Zip Code
Rocklin CA 95765

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

Name of Employer Allstate Insurance Company Occupation Financial Sales Consultan

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.47

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164904

Amount of Each Receipt this Period
32.83

SUBTOTAL of Receipts This Page (optional) ► **161.23**

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

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

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

FOR LINE NUMBER: PAGE 21 / 177
(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)
DOUGLAS L BORG

Mailing Address 2160 Red Setter Road

City State Zip Code
Rocklin CA 95765

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

Name of Employer Allstate Insurance Company Occupation Financial Sales Consultan

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 328.30

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165315

Amount of Each Receipt this Period
32.83

B. 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 ▼ 721.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164615

Amount of Each Receipt this Period
81.20

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 ▼ 802.52

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165025

Amount of Each Receipt this Period
81.20

SUBTOTAL of Receipts This Page (optional) ► 195.23

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 177
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) LONDON B BRADLEY		Date of Receipt
	Mailing Address 2411 Grey Eagle Bay		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	woodbury	MN	55129
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164878
Name of Employer Allstate Insurance Company		Occupation Territorial Sales Leader	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"/> 35.24
		<input type="text"/> 314.16	

B.	Full Name (Last, First, Middle Initial) LONDON B BRADLEY		Date of Receipt
	Mailing Address 2411 Grey Eagle Bay		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	woodbury	MN	55129
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1165289
Name of Employer Allstate Insurance Company		Occupation Territorial Sales Leader	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"/> 35.24
		<input type="text"/> 349.40	

C.	Full Name (Last, First, Middle Initial) KENNETH A BRANCH		Date of Receipt
	Mailing Address 28955 NIBLICK KNOLL CT.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	IVANHOE	IL	60060
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164850
Name of Employer Allstate Insurance Company		Occupation AVP Encompass Field Distr	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"/> 22.54
		<input type="text"/> 201.94	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 93.02
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 23 / 177
(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)
KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code
IVANHOE IL 60060

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 ▼ 224.48

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165261

Amount of Each Receipt this Period
22.54

B. Full Name (Last, First, Middle Initial)
JEFFREY P BRASK

Mailing Address 21285 S. BOSCHOME CIRCLE

City State Zip Code
KILDEER IL 60047

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

Name of Employer Allstate Insurance Company Occupation Claim Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 207.26

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165134

Amount of Each Receipt this Period
20.89

C. Full Name (Last, First, Middle Initial)
DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.50

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165013

Amount of Each Receipt this Period
20.23

SUBTOTAL of Receipts This Page (optional) ▶ 63.66

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 24 / 177
(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)
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 AVP PCCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.71

Date of Receipt: 05 / 06 / 2011
Transaction ID: A2011-1164712
Amount of Each Receipt this Period: 47.19

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

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP PCCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.90

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165122
Amount of Each Receipt this Period: 47.19

C. Full Name (Last, First, Middle Initial)
LINDA K BROBECK

Mailing Address 399 Summit Dr.

City State Zip Code
Emerald Hills CA 94062

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

Name of Employer Allstate Insurance Company Occupation Senior Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.06

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165092
Amount of Each Receipt this Period: 20.89

SUBTOTAL of Receipts This Page (optional) ► **115.27**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 177
(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)
LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code
FRANKLIN TN 37064

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.34

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164625

Amount of Each Receipt this Period
37.70

B.

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

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code
FRANKLIN TN 37064

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 374.04

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165035

Amount of Each Receipt this Period
37.70

C.

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

Mailing Address 2637 W. WILSON AVE.

City State Zip Code
CHICAGO IL 60625

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 ▼ 206.26

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165073

Amount of Each Receipt this Period
20.79

SUBTOTAL of Receipts This Page (optional) ► 96.19

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 177
(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)
CATHERINE S BRUNE

Mailing Address 190 SAVANNA CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation SVP & CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1696.14

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164630

Amount of Each Receipt this Period
188.46

B.

Full Name (Last, First, Middle Initial)
CATHERINE S BRUNE

Mailing Address 190 SAVANNA CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation SVP & CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1884.60

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165040

Amount of Each Receipt this Period
188.46

C.

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

Mailing Address 2514 SOUTH WESLEY AVE

City State Zip Code
BERWYN IL 60402

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.88

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164708

Amount of Each Receipt this Period
37.76

SUBTOTAL of Receipts This Page (optional) ► **414.68**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 177
(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)
JEFFREY E BURKE

Mailing Address 601 North Pines Trail

City State Zip Code
Parker CO 80138

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

Name of Employer Allstate Insurance Company Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 397.90

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164930

Amount of Each Receipt this Period
44.98

B.

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

Mailing Address 601 North Pines Trail

City State Zip Code
Parker CO 80138

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

Name of Employer Allstate Insurance Company Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 442.88

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165341

Amount of Each Receipt this Period
44.98

C.

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

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.89

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164593

Amount of Each Receipt this Period
25.13

SUBTOTAL of Receipts This Page (optional) ► **115.09**

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 29 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165003

Amount of Each Receipt this Period
25.13

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

Mailing Address 4121 109TH STREET

City State Zip Code
PLEASANT PRAIRI WI 53158

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 742.35

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164832

Amount of Each Receipt this Period
83.39

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

Mailing Address 4121 109TH STREET

City State Zip Code
PLEASANT PRAIRI WI 53158

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 825.74

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165243

Amount of Each Receipt this Period
83.39

SUBTOTAL of Receipts This Page (optional) ► **191.91**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 177
(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)
IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.49

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164844

Amount of Each Receipt this Period
25.89

B.

Full Name (Last, First, Middle Initial)
IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.38

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165255

Amount of Each Receipt this Period
25.89

C.

Full Name (Last, First, Middle Initial)
VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation Communication Senior Mana

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.62

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165190

Amount of Each Receipt this Period
21.79

SUBTOTAL of Receipts This Page (optional) ► **73.57**

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 31 / 177
(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 ▼ 391.48

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164761

Amount of Each Receipt this Period
44.16

B.

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 ▼ 435.64

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165172

Amount of Each Receipt this Period
44.16

C.

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

Mailing Address 2907 GLENARYE DR

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.31

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164787

Amount of Each Receipt this Period
26.71

SUBTOTAL of Receipts This Page (optional) ► **115.03**

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 32 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 2907 GLENARYE DR

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.02

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165198

Amount of Each Receipt this Period
26.71

B.

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

Mailing Address 8875 SILVERBERRY AVENUE

City State Zip Code
ELK GROVE CA 95624

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 289.15

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164929

Amount of Each Receipt this Period
32.79

C.

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

Mailing Address 8875 SILVERBERRY AVENUE

City State Zip Code
ELK GROVE CA 95624

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

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.94

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165340

Amount of Each Receipt this Period
32.79

SUBTOTAL of Receipts This Page (optional) ► 92.29

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 177

(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)
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 Occupation
Allstate Insurance Company Managing Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 339.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164657

Amount of Each Receipt this Period

38.40

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 Occupation
Allstate Insurance Company Managing Director

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

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165067

Amount of Each Receipt this Period

38.40

C.

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

Mailing Address 4667 TAMWORTH DR

City State Zip Code
PALM HARBOR FL 34685

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

Name of Employer Occupation
Allstate Insurance Company Regional Marketing Manage

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 274.92

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164785

Amount of Each Receipt this Period

30.68

SUBTOTAL of Receipts This Page (optional)

107.48

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 34 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DEBORAH L CLOUSER
Mailing Address 4667 TAMWORTH DR
City PALM HARBOR State FL Zip Code 34685
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Regional Marketing Manage
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.60
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165196
Amount of Each Receipt this Period 30.68

B. Full Name (Last, First, Middle Initial)
LISA D COCHRANE
Mailing Address 270 FAIRVIEW AVENUE
City WINNETKA State IL Zip Code 60093
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 319.11
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164747
Amount of Each Receipt this Period 36.07

C. Full Name (Last, First, Middle Initial)
LISA D COCHRANE
Mailing Address 270 FAIRVIEW AVENUE
City WINNETKA State IL Zip Code 60093
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 355.18
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165158
Amount of Each Receipt this Period 36.07

SUBTOTAL of Receipts This Page (optional) ► 102.82
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 35 / 177

(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)
PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City State Zip Code
KILDEER IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.58

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164750

Amount of Each Receipt this Period

22.74

B.

Full Name (Last, First, Middle Initial)
PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City State Zip Code
KILDEER IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.32

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165161

Amount of Each Receipt this Period

22.74

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 AVP Ast General Counsel &

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 409.09

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164700

Amount of Each Receipt this Period

46.05

SUBTOTAL of Receipts This Page (optional)

91.53

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 36 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.14

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165110

Amount of Each Receipt this Period
46.05

B.

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

Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

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

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.70

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164752

Amount of Each Receipt this Period
32.74

C.

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

Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

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

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.44

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165163

Amount of Each Receipt this Period
32.74

SUBTOTAL of Receipts This Page (optional) ► **111.53**

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 37 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 905 Chalet Court

City State Zip Code
Colleyville TX 76034

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.34

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164599

Amount of Each Receipt this Period 72.26

B.

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

Mailing Address 905 Chalet Court

City State Zip Code
Colleyville TX 76034

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 722.60

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165009

Amount of Each Receipt this Period 72.26

C.

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

Mailing Address 1020 Pleasant Street #1

City State Zip Code
Oak Park IL 60302

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

Name of Employer Allstate Insurance Company Occupation Communication Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.30

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164624

Amount of Each Receipt this Period 37.42

SUBTOTAL of Receipts This Page (optional) ► **181.94**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 1020 Pleasant Street #1

City State Zip Code
Oak Park IL 60302

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

Name of Employer Allstate Insurance Company Occupation Communication Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.72

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165034

Amount of Each Receipt this Period
37.42

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

Mailing Address 1954 Oakwood Dr

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.59

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164701

Amount of Each Receipt this Period
47.12

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

Mailing Address 1954 Oakwood Dr

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.71

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165111

Amount of Each Receipt this Period
47.12

SUBTOTAL of Receipts This Page (optional) ► **131.66**

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 39 / 177
(check only one)

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

A.

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

Mailing Address 1320 MULBERRY LN.

City State Zip Code
CARY IL 60013

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 353.51

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164647

Amount of Each Receipt this Period
39.71

B.

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

Mailing Address 1320 MULBERRY LN.

City State Zip Code
CARY IL 60013

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 393.22

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165057

Amount of Each Receipt this Period
39.71

C.

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

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP-Product Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 491.31

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164801

Amount of Each Receipt this Period
54.59

SUBTOTAL of Receipts This Page (optional) ► **134.01**

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

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

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

FOR LINE NUMBER: PAGE 40 / 177
(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)
JEFFREY F DEIGL
Mailing Address 453 PRAIRIE
City ELMHURST State IL Zip Code 60126
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AVP-Product Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 545.90
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165212
Amount of Each Receipt this Period 54.59

B. Full Name (Last, First, Middle Initial)
DEIDRE B DERRIG
Mailing Address 460 TOWER ROAD
City BARRINGTON State IL Zip Code 60010
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 ▼ 217.22
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165188
Amount of Each Receipt this Period 22.15

C. Full Name (Last, First, Middle Initial)
LORI A DESCH
Mailing Address 12923 Freemont Peak Lane
City Humble State TX Zip Code 77346
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Claims Field Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 398.39
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164641
Amount of Each Receipt this Period 45.59

SUBTOTAL of Receipts This Page (optional) ► 122.33
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 41 / 177
(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)
LORI A DESCH

Mailing Address 12923 Freemont Peak Lane

City State Zip Code
Humble TX 77346

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

Name of Employer Allstate Insurance Company Occupation Claims Field Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 443.98

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165051

Amount of Each Receipt this Period
45.59

B.

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

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP-Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 526.50

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164778

Amount of Each Receipt this Period
58.50

C.

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

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP-Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165189

Amount of Each Receipt this Period
58.50

SUBTOTAL of Receipts This Page (optional) ► 162.59

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 177

(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)
BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
Lincolnwood IL 60712

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

Name of Employer Occupation
Allstate Insurance Company Senior State Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 203.54

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165277

Amount of Each Receipt this Period

20.67

B.

Full Name (Last, First, Middle Initial)
PHILIP J DORN

Mailing Address 12 SAINT JOHN DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Finance Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165302

Amount of Each Receipt this Period

21.72

C.

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

Mailing Address 1706 ADLER LANE

City State Zip Code
MALVERN PA 19355

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

Name of Employer Occupation
Allstate Insurance Company Claims Field Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 203.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165012

Amount of Each Receipt this Period

20.38

SUBTOTAL of Receipts This Page (optional)

62.77

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 43 / 177

(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)
PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Occupation
Allstate Insurance Company CC IT Senior Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 257.73

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164679

Amount of Each Receipt this Period

28.89

B.

Full Name (Last, First, Middle Initial)
PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Occupation
Allstate Insurance Company CC IT Senior Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.62

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165089

Amount of Each Receipt this Period

28.89

C.

Full Name (Last, First, Middle Initial)
DONALD L DUFF

Mailing Address 127 E. STREAMWOOD BLVD.

City State Zip Code
STREAMWOOD IL 60107

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

Name of Employer Occupation
Allstate Insurance Company Line of Bus Sr Mgr-Small

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 214.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164676

Amount of Each Receipt this Period

24.28

SUBTOTAL of Receipts This Page (optional) ▶

82.06

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

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

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

FOR LINE NUMBER: PAGE 44 / 177
(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)
DONALD L DUFF

Mailing Address 127 E. STREAMWOOD BLVD.

City State Zip Code
STREAMWOOD IL 60107

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

Name of Employer Allstate Insurance Company Occupation Line of Bus Sr Mgr-Small

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 239.08

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165086

Amount of Each Receipt this Period
24.28

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

Mailing Address 18202 HARNISH RD.

City State Zip Code
ROSCOE IL 61073

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

Name of Employer Allstate Insurance Company Occupation Allstate Financial Senior

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164760

Amount of Each Receipt this Period
26.96

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

Mailing Address 18202 HARNISH RD.

City State Zip Code
ROSCOE IL 61073

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

Name of Employer Allstate Insurance Company Occupation Allstate Financial Senior

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.96

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165171

Amount of Each Receipt this Period
26.96

SUBTOTAL of Receipts This Page (optional) ► 78.20

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 45 / 177
(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)
LAURA DUNNE

Mailing Address 1810 BALMORAL AVE

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation AVP-Encompass Finance & D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.33

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164764

Amount of Each Receipt this Period
23.53

B.

Full Name (Last, First, Middle Initial)
LAURA DUNNE

Mailing Address 1810 BALMORAL AVE

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation AVP-Encompass Finance & D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.86

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165175

Amount of Each Receipt this Period
23.53

C.

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

Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60005

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.43

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164784

Amount of Each Receipt this Period
30.87

SUBTOTAL of Receipts This Page (optional) ► **77.93**

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 46 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60005

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 306.30

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165195

Amount of Each Receipt this Period
30.87

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

Mailing Address 1327 N Illinois Avenue

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Vice President Product AF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.13

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164684

Amount of Each Receipt this Period
34.61

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

Mailing Address 1327 N Illinois Avenue

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Vice President Product AF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 344.74

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165094

Amount of Each Receipt this Period
34.61

SUBTOTAL of Receipts This Page (optional) ► **100.09**

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 47 / 177

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 3077 EAST LAKE RD

City State Zip Code
MCDONOUGH GA 30252

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

Name of Employer Occupation
Allstate Insurance Company Field Product Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.85

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164636

Amount of Each Receipt this Period
30.05

B.

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

Mailing Address 3077 EAST LAKE RD

City State Zip Code
MCDONOUGH GA 30252

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

Name of Employer Occupation
Allstate Insurance Company Field Product Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165046

Amount of Each Receipt this Period
30.05

C.

Full Name (Last, First, Middle Initial)
SHEILA A ECKHOFF

Mailing Address 211 N ERIE ST

City State Zip Code
WHEATON IL 60187

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

Name of Employer Occupation
Allstate Insurance Company Frontline Performance Lea

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 218.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165082

Amount of Each Receipt this Period
21.89

SUBTOTAL of Receipts This Page (optional) ▶

81.99

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 177
(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)
KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City State Zip Code
CHICAGO IL 60655

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

Name of Employer Occupation
Allstate Insurance Company AVP Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 354.51

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164791

Amount of Each Receipt this Period

39.99

B.

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

Mailing Address 10323 TRUMBULL AVE

City State Zip Code
CHICAGO IL 60655

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

Name of Employer Occupation
Allstate Insurance Company AVP Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 394.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165202

Amount of Each Receipt this Period

39.99

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 Occupation
Allstate Insurance Company AVP Finance Innovation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 488.85

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164555

Amount of Each Receipt this Period

54.77

SUBTOTAL of Receipts This Page (optional) ▶

134.75

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 177
	<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 L ESCOBAR		Date of Receipt
	Mailing Address 660 BALMORAL LANE		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	INVERNESS	IL	60067
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164965
Name of Employer Allstate Insurance Company		Occupation AVP Finance Innovation	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="543.62"/>	<input type="text" value="54.77"/>

B.	Full Name (Last, First, Middle Initial) THOMAS W EVANS		Date of Receipt
	Mailing Address 1224 BARCLAY CIRCLE		<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	BARRINGTON	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164585
Name of Employer Allstate Insurance Company		Occupation Vice President Marketing	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="401.35"/>	<input type="text" value="44.79"/>

C.	Full Name (Last, First, Middle Initial) THOMAS W EVANS		Date of Receipt
	Mailing Address 1224 BARCLAY CIRCLE		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	BARRINGTON	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164995
Name of Employer Allstate Insurance Company		Occupation Vice President Marketing	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="446.14"/>	<input type="text" value="44.79"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="144.35"/>
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 50 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164843

Amount of Each Receipt this Period
40.36

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

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 401.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165254

Amount of Each Receipt this Period
40.36

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

Mailing Address 918 JUNIPER ROAD

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation Senior Regional Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 256.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164819

Amount of Each Receipt this Period
29.01

SUBTOTAL of Receipts This Page (optional) ► **109.73**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 177
(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)
CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation Senior Regional Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.10

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165230

Amount of Each Receipt this Period
29.01

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

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.87

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164590

Amount of Each Receipt this Period
26.55

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

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 263.42

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165000

Amount of Each Receipt this Period
26.55

SUBTOTAL of Receipts This Page (optional) ► **82.11**

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: (check only one)	PAGE 52 / 177
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) LISA J FLANARY		Date of Receipt																					
	Mailing Address 1007 Harris Road		<table border="1"> <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>5</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	6		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	6		2	0	1	1														
	City State Zip Code GRAYSLAKE IL 60030		Transaction ID: A2011-1164829																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Allstate Insurance Company Occupation: AVP Distribution Channel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 319.42		36.26																						

B.	Full Name (Last, First, Middle Initial) LISA J FLANARY		Date of Receipt																					
	Mailing Address 1007 Harris Road		<table border="1"> <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>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		2	0		2	0	1	1														
	City State Zip Code GRAYSLAKE IL 60030		Transaction ID: A2011-1165240																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Allstate Insurance Company Occupation: AVP Distribution Channel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.68		36.26																						

C.	Full Name (Last, First, Middle Initial) AMY C FLOYD		Date of Receipt																					
	Mailing Address 1025 BONITA DRIVE		<table border="1"> <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>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		2	0		2	0	1	1														
	City State Zip Code PARK RIDGE IL 60068		Transaction ID: A2011-1165049																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Allstate Insurance Company Occupation: Tax Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 216.60		27.18																						

SUBTOTAL of Receipts This Page (optional)	▶	99.70
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 177
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) KELLY F FOGARTY		Date of Receipt
	Mailing Address 613 REX		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	ELMHURST	IL	60126
	FEC ID number of contributing federal political committee.		Transaction ID: A2011-1164711
Name of Employer Allstate Insurance Company		Occupation AVP State Team	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 387.44	<input type="text"/> 44.60

B.	Full Name (Last, First, Middle Initial) KELLY F FOGARTY		Date of Receipt
	Mailing Address 613 REX		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	ELMHURST	IL	60126
	FEC ID number of contributing federal political committee.		Transaction ID: A2011-1165121
Name of Employer Allstate Insurance Company		Occupation AVP State Team	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 432.04	<input type="text"/> 44.60

C.	Full Name (Last, First, Middle Initial) ANGELA K FONTANA		Date of Receipt
	Mailing Address 1280 WILD ROSE LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee.		Transaction ID: A2011-1165279
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"/> 206.84	<input type="text"/> 21.20

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 110.40
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 54 / 177
(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 Allstate Insurance Company Occupation Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.82

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164601

Amount of Each Receipt this Period
36.34

B.

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 Allstate Insurance Company Occupation Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 359.16

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165011

Amount of Each Receipt this Period
36.34

C.

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

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.83

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164550

Amount of Each Receipt this Period
26.87

SUBTOTAL of Receipts This Page (optional) ► 99.55

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

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

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

FOR LINE NUMBER: PAGE 55 / 177
(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)
VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.70

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164960

Amount of Each Receipt this Period
26.87

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

Mailing Address 1129 N Mitchell Ave

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Director FSS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.46

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164740

Amount of Each Receipt this Period
36.95

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

Mailing Address 1129 N Mitchell Ave

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Allstate Insurance Company Occupation Director FSS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.41

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165151

Amount of Each Receipt this Period
36.95

SUBTOTAL of Receipts This Page (optional) ► 100.77

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: (check only one)	PAGE 56 / 177
	<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) BONNIE S GILL	Date of Receipt MM / DD / YYYY 05 / 06 / 2011
	Mailing Address 1570 EDGEFIELD LANE	Transaction ID: A2011-1164870
	City State Zip Code HOFFMAN ESTATES IL 60169	Amount of Each Receipt this Period 31.76
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP State Team Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 285.84	

B.	Full Name (Last, First, Middle Initial) BONNIE S GILL	Date of Receipt MM / DD / YYYY 05 / 20 / 2011
	Mailing Address 1570 EDGEFIELD LANE	Transaction ID: A2011-1165281
	City State Zip Code HOFFMAN ESTATES IL 60169	Amount of Each Receipt this Period 31.76
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP State Team Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 317.60	

C.	Full Name (Last, First, Middle Initial) JOAN GILMORE	Date of Receipt MM / DD / YYYY 05 / 06 / 2011
	Mailing Address 656 S BUCKINGHAM CT	Transaction ID: A2011-1164556
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 42.68
	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 Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 378.84	

SUBTOTAL of Receipts This Page (optional)	106.20
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 57 / 177

(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 ▼ 421.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164966

Amount of Each Receipt this Period

42.68

B.

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

Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 209.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165097

Amount of Each Receipt this Period

21.09

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 Occupation
Allstate Insurance Company Associate Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 308.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164910

Amount of Each Receipt this Period

34.46

SUBTOTAL of Receipts This Page (optional)

98.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 177
(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)
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 ▼ 342.56

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165321

Amount of Each Receipt this Period
34.46

B.

Full Name (Last, First, Middle Initial)
GEORGE F GRAWE

Mailing Address 18799 GUNN HIGHWAY

City State Zip Code
ODESSA FL 33556

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 ▼ 202.43

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164638

Amount of Each Receipt this Period
23.07

C.

Full Name (Last, First, Middle Initial)
GEORGE F GRAWE

Mailing Address 18799 GUNN HIGHWAY

City State Zip Code
ODESSA FL 33556

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 ▼ 225.50

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165048

Amount of Each Receipt this Period
23.07

SUBTOTAL of Receipts This Page (optional) ► 80.60

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 177
	<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) PAMELA P GRAY		Date of Receipt
	Mailing Address 50 E. BELLEVUE PL. #2402		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	CHICAGO	IL	60611
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164852
Name of Employer Allstate Insurance Company		Occupation Senior Marketing Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.57	<input type="text"/> 28.77

B.	Full Name (Last, First, Middle Initial) PAMELA P GRAY		Date of Receipt
	Mailing Address 50 E. BELLEVUE PL. #2402		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	CHICAGO	IL	60611
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1165263
Name of Employer Allstate Insurance Company		Occupation Senior Marketing Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 284.34	<input type="text"/> 28.77

C.	Full Name (Last, First, Middle Initial) Mark Green		Date of Receipt
	Mailing Address 19586 Saratoga Springs PI		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	Ashburn	VA	20147
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1165350
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 ▼ 215.28	<input type="text"/> 53.82

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 111.36
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 60 / 177
(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 338 North Kenilworth

City State Zip Code
OAK PARK IL 60302

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 575.80

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164652

Amount of Each Receipt this Period
68.08

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

Mailing Address 338 North Kenilworth

City State Zip Code
OAK PARK IL 60302

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 643.88

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165062

Amount of Each Receipt this Period
68.08

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

Mailing Address 91 STABLE WAY

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 229.85

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164565

Amount of Each Receipt this Period
25.65

SUBTOTAL of Receipts This Page (optional) ► **161.81**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 177
(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)
ANN M GROSS

Mailing Address 91 STABLE WAY

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.50

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164975

Amount of Each Receipt this Period
25.65

B.

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

Mailing Address 417 Adams Avenue

City State Zip Code
Glencoe IL 60022

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.45

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164818

Amount of Each Receipt this Period
27.29

C.

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

Mailing Address 417 Adams Avenue

City State Zip Code
Glencoe IL 60022

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.74

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165229

Amount of Each Receipt this Period
27.29

SUBTOTAL of Receipts This Page (optional) ► **80.23**

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

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

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

FOR LINE NUMBER: PAGE 62 / 177

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
RICHARD H HALBERG

Mailing Address 300 Tanager Lane

City State Zip Code
Lindenhurst IL 60046

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 ▼ 295.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164909

Amount of Each Receipt this Period

33.10

B.

Full Name (Last, First, Middle Initial)
RICHARD H HALBERG

Mailing Address 300 Tanager Lane

City State Zip Code
Lindenhurst IL 60046

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 ▼ 311.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165320

Amount of Each Receipt this Period

16.55

C.

Full Name (Last, First, Middle Initial)
RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 334.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164879

Amount of Each Receipt this Period

37.86

SUBTOTAL of Receipts This Page (optional) ▶

87.51

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 63 / 177
(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)
RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation Claim Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 372.80

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165290

Amount of Each Receipt this Period
37.86

B.

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

Mailing Address 1278 Cobble Pond Way

City State Zip Code
Vienna VA 22182

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 ▼ 248.40

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164941

Amount of Each Receipt this Period
62.10

C.

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

Mailing Address 1278 Cobble Pond Way

City State Zip Code
Vienna VA 22182

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 ▼ 310.50

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165352

Amount of Each Receipt this Period
62.10

SUBTOTAL of Receipts This Page (optional) ► **162.06**

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

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

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

FOR LINE NUMBER: PAGE 64 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KEITH A HAUSCHILDT
Mailing Address 636 ROSEDALE AVE
City ROSELLE State IL Zip Code 60172
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AVP AF Operations & Techn
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 235.93
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164648
Amount of Each Receipt this Period 26.53

B. Full Name (Last, First, Middle Initial)
KEITH A HAUSCHILDT
Mailing Address 636 ROSEDALE AVE
City ROSELLE State IL Zip Code 60172
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AVP AF Operations & Techn
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 262.46
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165058
Amount of Each Receipt this Period 26.53

C. Full Name (Last, First, Middle Initial)
RICHARD J HENEBERRY
Mailing Address 23 CLAYTON
City LAKE VILLA State IL Zip Code 60046
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AVP Corporate Marketing
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 230.41
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164665
Amount of Each Receipt this Period 25.77

SUBTOTAL of Receipts This Page (optional) ► 78.83
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 65 / 177
(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 J HENEBERRY

Mailing Address 23 CLAYTON

City State Zip Code
LAKE VILLA IL 60046

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

Name of Employer Allstate Insurance Company Occupation AVP Corporate Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 256.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165075

Amount of Each Receipt this Period
25.77

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 Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1114.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164622

Amount of Each Receipt this Period
125.00

C. 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 Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1239.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165032

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **275.77**

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 66 / 177
(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)
PAULA M HODGES
Mailing Address 7310 S 34TH CT
City LINCORN State NE Zip Code 68516
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Allstate Financial Senior
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 269.34
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164888
Amount of Each Receipt this Period 30.22

B. Full Name (Last, First, Middle Initial)
PAULA M HODGES
Mailing Address 7310 S 34TH CT
City LINCORN State NE Zip Code 68516
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Allstate Financial Senior
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 299.56
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165299
Amount of Each Receipt this Period 30.22

C. Full Name (Last, First, Middle Initial)
LINDA M HONOUR
Mailing Address 1066 Griffith Rd.
City Lake Forest State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation VP Investment Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.26
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164922
Amount of Each Receipt this Period 46.14

SUBTOTAL of Receipts This Page (optional) ► 106.58
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 67 / 177
	(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) LINDA M HONOUR		Date of Receipt
	Mailing Address 1066 Griffith Rd.		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Lake Forest	IL	60045
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation VP Investment Operations	Transaction ID: A2011-1165333
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="461.40"/>	<input type="text" value="46.14"/>

B.	Full Name (Last, First, Middle Initial) F M HORD		Date of Receipt
	Mailing Address 1101 S. State Street 1002		<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Chicago	IL	60605
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation Claims Service Manager	Transaction ID: A2011-1164661
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="297.24"/>	<input type="text" value="33.60"/>

C.	Full Name (Last, First, Middle Initial) F M HORD		Date of Receipt
	Mailing Address 1101 S. State Street 1002		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Chicago	IL	60605
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allstate Insurance Company		Occupation Claims Service Manager	Transaction ID: A2011-1165071
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="330.84"/>	<input type="text" value="33.60"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="113.34"/>
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 68 / 177
(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)
MARY L HUBER
 Mailing Address 1532 NORTH BELMONT AVE.
 City State Zip Code
 ARLINGTON HTS. IL 60004
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 1
Transaction ID: A2011-1165251
 Amount of Each Receipt this Period
 20.28
 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 ▼ 202.00

B. Full Name (Last, First, Middle Initial)
STEPHEN L IHM
 Mailing Address 21558 W GOLDFINCH CT
 City State Zip Code
 KILDEER IL 60047
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 6 / 2 0 1 1
Transaction ID: A2011-1164743
 Amount of Each Receipt this Period
 51.63
 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 ▼ 456.75

C. Full Name (Last, First, Middle Initial)
STEPHEN L IHM
 Mailing Address 21558 W GOLDFINCH CT
 City State Zip Code
 KILDEER IL 60047
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 1
Transaction ID: A2011-1165154
 Amount of Each Receipt this Period
 51.63
 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 ▼ 508.38

SUBTOTAL of Receipts This Page (optional) ► 123.54
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 177
(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)
LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code
CARY IL 60013

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

Name of Employer Allstate Insurance Company Occupation Senior Sourcing Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.35

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164703

Amount of Each Receipt this Period
30.75

B.

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

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code
CARY IL 60013

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

Name of Employer Allstate Insurance Company Occupation Senior Sourcing Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.10

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165113

Amount of Each Receipt this Period
30.75

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 ▼ 737.82

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164688

Amount of Each Receipt this Period
82.70

SUBTOTAL of Receipts This Page (optional) ► 144.20

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 70 / 177
(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 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 820.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165098

Amount of Each Receipt this Period
82.70

B. Full Name (Last, First, Middle Initial)
BOB A JACKSON

Mailing Address 226 Maison Court

City State Zip Code
Altamonte Springs FL 32714

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

Name of Employer Allstate Insurance Company Occupation Regional Sales Leader

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 221.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165296

Amount of Each Receipt this Period
22.26

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

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Field Operations Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164681

Amount of Each Receipt this Period
36.58

SUBTOTAL of Receipts This Page (optional) ► **141.54**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 177
(check only one)

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

A.

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

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Field Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 357.52

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165091

Amount of Each Receipt this Period
36.58

B.

Full Name (Last, First, Middle Initial)
JOHN A KANE

Mailing Address 1 LONGLEY PLACE

City State Zip Code
HUNTINGTON STA NY 11746

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

Name of Employer Allstate Insurance Company Occupation Regional Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.58

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164973

Amount of Each Receipt this Period
21.65

C.

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

Mailing Address 1430 ROLLING LINKS DRIVE

City State Zip Code
ALPHARETTA GA 30004

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 477.73

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164545

Amount of Each Receipt this Period
54.45

SUBTOTAL of Receipts This Page (optional) ► 112.68

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 177
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 1430 ROLLING LINKS DRIVE

City State Zip Code
ALPHARETTA GA 30004

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 532.18

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1164955
Amount of Each Receipt this Period: 54.45

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 ▼ 373.14

Date of Receipt: 05 / 06 / 2011
Transaction ID: A2011-1164683
Amount of Each Receipt this Period: 42.18

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

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.32

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165093
Amount of Each Receipt this Period: 42.18

SUBTOTAL of Receipts This Page (optional) ► 138.81

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 177 (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

<p>A. Full Name (Last, First, Middle Initial) PAUL N KIERIG</p> <p>Mailing Address 200 OXFORD RD</p> <p>City State Zip Code Tower Lakes IL 60010</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel &</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 233.45</p>	<p>Date of Receipt <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>5</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr> </table> </p> <p>Transaction ID: A2011-1164727</p> <p>Amount of Each Receipt this Period 26.05 </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	6		2	0	1	1												

<p>B. Full Name (Last, First, Middle Initial) PAUL N KIERIG</p> <p>Mailing Address 200 OXFORD RD</p> <p>City State Zip Code Tower Lakes IL 60010</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel &</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 259.50</p>	<p>Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr> </table> </p> <p>Transaction ID: A2011-1165137</p> <p>Amount of Each Receipt this Period 26.05 </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	1												

<p>C. Full Name (Last, First, Middle Initial) TIMOTHY L KNAPP</p> <p>Mailing Address 132 FARMSTEAD CIRCLE</p> <p>City State Zip Code LEBANON PA 17042</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company Occupation Home Office Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 206.86</p>	<p>Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr> </table> </p> <p>Transaction ID: A2011-1165007</p> <p>Amount of Each Receipt this Period 20.97 </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	1												

SUBTOTAL of Receipts This Page (optional)	73.07
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 177 (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 D KNIPP Mailing Address 2050 GLENDALE AVE <hr/> City State Zip Code NORTHBROOK IL 60062 <hr/> FEC ID number of contributing federal political committee. C <hr/> Name of Employer Allstate Insurance Company Occupation Operations Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 304.73	Date of Receipt <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>5</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> Transaction ID: A2011-1164876 <hr/> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">34.73</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	6		2	0	1	1												

B. Full Name (Last, First, Middle Initial) JEFFREY D KNIPP Mailing Address 2050 GLENDALE AVE <hr/> City State Zip Code NORTHBROOK IL 60062 <hr/> FEC ID number of contributing federal political committee. C <hr/> Name of Employer Allstate Insurance Company Occupation Operations Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 339.46	Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> Transaction ID: A2011-1165287 <hr/> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">34.73</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	1												

C. Full Name (Last, First, Middle Initial) GARY L KOCHANЕК Mailing Address 743 CARDIGAN CT <hr/> City State Zip Code NAPERVILLE IL 60565 <hr/> FEC ID number of contributing federal political committee. C <hr/> Name of Employer Allstate Insurance Company Occupation Finance Senior Manager Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 294.30	Date of Receipt <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>5</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> Transaction ID: A2011-1164690 <hr/> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">32.70</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	6		2	0	1	1												

SUBTOTAL of Receipts This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px;">102.16</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GARY L KOCHANЕК

Mailing Address 743 CARDIGAN CT

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Finance Senior Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.00

Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165100

Amount of Each Receipt this Period 32.70

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

Mailing Address 1503 ALMADEN LN

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.83

Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164795

Amount of Each Receipt this Period 32.15

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

Mailing Address 1503 ALMADEN LN

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation CC IT Planning Consultant

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 318.98

Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165206

Amount of Each Receipt this Period 32.15

SUBTOTAL of Receipts This Page (optional) 97.00

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 76 / 177
(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 Lacher

Mailing Address 2775 Sanders Road Suite A5

City State Zip Code
Northbrook IL 60062

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

Name of Employer Occupation
Allstate Insurance Company President Allstate Protection

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1442.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164942

Amount of Each Receipt this Period

168.46

B.

Full Name (Last, First, Middle Initial)
Joseph Lacher

Mailing Address 2775 Sanders Road Suite A5

City State Zip Code
Northbrook IL 60062

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

Name of Employer Occupation
Allstate Insurance Company President Allstate Protection

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1610.76

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165353

Amount of Each Receipt this Period

168.46

C.

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

Mailing Address 20580 HIGH RIDGE DR.

City State Zip Code
KILDEER IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 636.39

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164730

Amount of Each Receipt this Period

70.71

SUBTOTAL of Receipts This Page (optional) ▶

407.63

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 77 / 177

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 20580 HIGH RIDGE DR.

City State Zip Code
KILDEER IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Vice President Product

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 707.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165141

Amount of Each Receipt this Period

70.71

B.

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

Mailing Address 3 Jackson Manor Court

City State Zip Code
Phoenix MD 21131

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

Name of Employer Occupation
Allstate Insurance Company Vice President - Presiden

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1086.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164936

Amount of Each Receipt this Period

121.30

C.

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

Mailing Address 3 Jackson Manor Court

City State Zip Code
Phoenix MD 21131

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

Name of Employer Occupation
Allstate Insurance Company Vice President - Presiden

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1208.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165347

Amount of Each Receipt this Period

121.30

SUBTOTAL of Receipts This Page (optional) ▶

313.31

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 177
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) PHILLIP E LAWSON		Date of Receipt
	Mailing Address 1190 Palmer AVENUE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	WINTER PARK	FL	32789
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164882
Name of Employer Allstate Insurance Company		Occupation Vice President Field	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 735.64	<input type="text"/> 83.16

B.	Full Name (Last, First, Middle Initial) PHILLIP E LAWSON		Date of Receipt
	Mailing Address 1190 Palmer AVENUE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	WINTER PARK	FL	32789
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1165293
Name of Employer Allstate Insurance Company		Occupation Vice President Field	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 818.80	<input type="text"/> 83.16

C.	Full Name (Last, First, Middle Initial) MICHELLE LEE		Date of Receipt
	Mailing Address 1404 100TH AVENUE NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	BELLEVUE	WA	98004
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164911
Name of Employer Allstate Insurance Company		Occupation Vice President Field	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 590.38	<input type="text"/> 66.74

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 233.06
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 177
(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)
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 ▼ 657.12

Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165322
Amount of Each Receipt this Period 66.74

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

Mailing Address 1705 DARTMOUTH LN

City State Zip Code
DEERFIELD IL 60015

FEC ID number of contributing federal political committee. C

Name of Employer: Allstate Insurance Company Occupation: Vice President Sec & Gene

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 269.64

Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164544
Amount of Each Receipt this Period 30.16

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

Mailing Address 1705 DARTMOUTH LN

City State Zip Code
DEERFIELD IL 60015

FEC ID number of contributing federal political committee. C

Name of Employer: Allstate Insurance Company Occupation: Vice President Sec & Gene

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 299.80

Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1164954
Amount of Each Receipt this Period 30.16

SUBTOTAL of Receipts This Page (optional) 127.06

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 80 / 177
(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)
ANDREW P LEICHT
Mailing Address 2318 Coach Rd.
City Long Grove State IL Zip Code 60047
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Architect
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.86
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164694
Amount of Each Receipt this Period 26.54

B. Full Name (Last, First, Middle Initial)
ANDREW P LEICHT
Mailing Address 2318 Coach Rd.
City Long Grove State IL Zip Code 60047
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Architect
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.40
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165104
Amount of Each Receipt this Period 26.54

C. Full Name (Last, First, Middle Initial)
NANCY L LEMKE
Mailing Address 5697 BROOKSTONE WALK
City ACWORTH State GA Zip Code 30101
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior Field Corporate Re
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.18
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164755
Amount of Each Receipt this Period 22.90

SUBTOTAL of Receipts This Page (optional) ► 75.98
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 81 / 177
(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)
NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City State Zip Code
ACWORTH GA 30101

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

Name of Employer Occupation
Allstate Insurance Company Senior Field Corporate Re

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 228.08

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165166

Amount of Each Receipt this Period

22.90

B.

Full Name (Last, First, Middle Initial)
KELLY J LIEN

Mailing Address 3 BEDFORD COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Senior State Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165307

Amount of Each Receipt this Period

20.75

C.

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

Mailing Address P.O. BOX 9242

City State Zip Code
GLENDALE CA 91226

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

Name of Employer Occupation
Allstate Insurance Company Managing Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 287.69

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164913

Amount of Each Receipt this Period

32.45

SUBTOTAL of Receipts This Page (optional)

76.10

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 82 / 177

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address P.O. BOX 9242

City State Zip Code
GLENDALE CA 91226

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

Name of Employer Allstate Insurance Company Occupation Managing Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165324

Amount of Each Receipt this Period

32.45

B.

Full Name (Last, First, Middle Initial)
COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City State Zip Code
SCHAUMBURG IL 60193

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

Name of Employer Allstate Insurance Company Occupation Accounting Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.42

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165169

Amount of Each Receipt this Period

22.15

C.

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 ▼ 303.56

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164781

Amount of Each Receipt this Period

33.80

SUBTOTAL of Receipts This Page (optional) ▶

88.40

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 83 / 177

(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)
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 Occupation
Allstate Insurance Company Associate Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 337.36

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165192

Amount of Each Receipt this Period

33.80

B.

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

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

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

Name of Employer Occupation
Allstate Insurance Company Regional Sales Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164839

Amount of Each Receipt this Period

22.44

C.

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

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

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

Name of Employer Occupation
Allstate Insurance Company Regional Sales Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165250

Amount of Each Receipt this Period

22.44

SUBTOTAL of Receipts This Page (optional)

78.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 177
(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)
MORRIS A MADURO

Mailing Address PO BOX 4343

City NAPERVILLE State IL Zip Code 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 ▼ 374.58

Date of Receipt: 05 / 06 / 2011
Transaction ID: A2011-1164566
 Amount of Each Receipt this Period: 41.62

B.

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

Mailing Address PO BOX 4343

City NAPERVILLE State IL Zip Code 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 ▼ 416.20

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1164976
 Amount of Each Receipt this Period: 41.62

C.

Full Name (Last, First, Middle Initial)
KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City MUNDELEIN State IL Zip Code 60060

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 ▼ 207.56

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165108
 Amount of Each Receipt this Period: 21.04

SUBTOTAL of Receipts This Page (optional) ► 104.28

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 85 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City State Zip Code
LAKE BLUFF IL 60044

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 ▼ 210.92

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165193

Amount of Each Receipt this Period
21.50

B. Full Name (Last, First, Middle Initial)
Michele C Mayes

Mailing Address 1630 Chicago Avenue

City State Zip Code
Evanston IL 60201

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

Name of Employer Allstate Insurance Company Occupation SVP & Chief Legal Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1199.32

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164925

Amount of Each Receipt this Period
135.00

C. Full Name (Last, First, Middle Initial)
Michele C Mayes

Mailing Address 1630 Chicago Avenue

City State Zip Code
Evanston IL 60201

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

Name of Employer Allstate Insurance Company Occupation SVP & Chief Legal Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1334.32

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165336

Amount of Each Receipt this Period
135.00

SUBTOTAL of Receipts This Page (optional) ► 291.50

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 86 / 177

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

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 Occupation
Allstate Insurance Company Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 742.05

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164767

Amount of Each Receipt this Period

82.45

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 Occupation
Allstate Insurance Company Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 824.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165178

Amount of Each Receipt this Period

82.45

C.

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

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164718

Amount of Each Receipt this Period

40.56

SUBTOTAL of Receipts This Page (optional)

205.46

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 87 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JOHN 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 ▼ 405.60
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165128
Amount of Each Receipt this Period 40.56

B. Full Name (Last, First, Middle Initial)
SALLY J MCCARTHY
Mailing Address 1036 ROLLING PASS
City GLENVIEW State IL Zip Code 60025
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AF Sr Marketing Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 219.71
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165176
Amount of Each Receipt this Period 22.26

C. Full Name (Last, First, Middle Initial)
MARK A MCGILLIVRAY
Mailing Address 1028 PORTSMOUTH CIRCLE
City GURNEE State IL Zip Code 60031
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AVP PCCSO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.98
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164897
Amount of Each Receipt this Period 27.50

SUBTOTAL of Receipts This Page (optional) ► 90.32
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 88 / 177

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Occupation
Allstate Insurance Company AVP PCCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 273.48

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165308

Amount of Each Receipt this Period

27.50

B.

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

Mailing Address 103 Wateredge Court

City State Zip Code
Safety Harbor FL 34695

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 ▼ 354.66

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164893

Amount of Each Receipt this Period

40.26

C.

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

Mailing Address 103 Wateredge Court

City State Zip Code
Safety Harbor FL 34695

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 ▼ 394.92

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165304

Amount of Each Receipt this Period

40.26

SUBTOTAL of Receipts This Page (optional)

108.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 177
(check only one)

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

A.

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

Mailing Address 5065 Raintree Circle

City State Zip Code
Parker CO 80134

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.51

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164616

Amount of Each Receipt this Period
26.51

B.

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

Mailing Address 5065 Raintree Circle

City State Zip Code
Parker CO 80134

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.02

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165026

Amount of Each Receipt this Period
26.51

C.

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

Mailing Address 180 EVERGREEN AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation Senior Actuary and Direct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.73

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164709

Amount of Each Receipt this Period
16.85

SUBTOTAL of Receipts This Page (optional) ► 69.87

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 177
(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)
PETER D MCPHERSON

Mailing Address 180 EVERGREEN AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation Senior Actuary and Direct

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 267.58

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165119

Amount of Each Receipt this Period
16.85

B. Full Name (Last, First, Middle Initial)
JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City State Zip Code
LAKE ZURICH IL 60047

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 ▼ 234.13

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164645

Amount of Each Receipt this Period
26.33

C. Full Name (Last, First, Middle Initial)
JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City State Zip Code
LAKE ZURICH IL 60047

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 ▼ 260.46

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165055

Amount of Each Receipt this Period
26.33

SUBTOTAL of Receipts This Page (optional) ▶ 69.51

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 91 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 21050 PRESTWICK DRIVE

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Fiel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.83

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164559

Amount of Each Receipt this Period
35.87

B.

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

Mailing Address 21050 PRESTWICK DRIVE

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Fiel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 356.70

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164969

Amount of Each Receipt this Period
35.87

C.

Full Name (Last, First, Middle Initial)
FREDERICK J MILLER

Mailing Address 6975 MEADOW POINT TER

City State Zip Code
NEW MARKET MD 21774

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

Name of Employer Allstate Insurance Company Occupation Regional EB Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.91

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164658

Amount of Each Receipt this Period
30.31

SUBTOTAL of Receipts This Page (optional) ► **102.05**

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 92 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
FREDERICK J MILLER

Mailing Address 6975 MEADOW POINT TER

City State Zip Code
NEW MARKET MD 21774

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

Name of Employer Allstate Insurance Company Occupation Regional EB Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 296.22

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165068

Amount of Each Receipt this Period
30.31

B.

Full Name (Last, First, Middle Initial)
STEVEN M MILLER

Mailing Address 1011 Redwood Drive

City State Zip Code
ALGONQUIN IL 60102

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 ▼ 213.13

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164815

Amount of Each Receipt this Period
23.89

C.

Full Name (Last, First, Middle Initial)
STEVEN M MILLER

Mailing Address 1011 Redwood Drive

City State Zip Code
ALGONQUIN IL 60102

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 ▼ 237.02

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165226

Amount of Each Receipt this Period
23.89

SUBTOTAL of Receipts This Page (optional) ► **78.09**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 177
(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)
MARCIE E MOLEK
Mailing Address 400 KEVIN LANE
City GRAYSLAKE State IL Zip Code 60030
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AVP PCCSO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.65
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164704
Amount of Each Receipt this Period 25.45

B. Full Name (Last, First, Middle Initial)
MARCIE E MOLEK
Mailing Address 400 KEVIN LANE
City GRAYSLAKE State IL Zip Code 60030
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AVP PCCSO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.10
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165114
Amount of Each Receipt this Period 25.45

C. Full Name (Last, First, Middle Initial)
DEBBIE A MORALES
Mailing Address 21285 S. BOSCHOME CIRCLE
City KILDEER State IL Zip Code 60047
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Claim Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.03
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164853
Amount of Each Receipt this Period 37.15

SUBTOTAL of Receipts This Page (optional) ► 88.05
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 94 / 177

(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)
DEBBIE A MORALES

Mailing Address 21285 S. BOSCHOME CIRCLE

City State Zip Code
KILDEER IL 60047

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

Name of Employer Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 367.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165264

Amount of Each Receipt this Period

37.15

B.

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

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 328.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164614

Amount of Each Receipt this Period

37.02

C.

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

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165024

Amount of Each Receipt this Period

37.02

SUBTOTAL of Receipts This Page (optional) ▶

111.19

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 177
(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 F MULVIHILL

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 367.39

Date of Receipt: 05 / 06 / 2011
Transaction ID: A2011-1164691
 Amount of Each Receipt this Period: 41.27

B.

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

Mailing Address 2445 CHERRY LANE

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 408.66

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165101
 Amount of Each Receipt this Period: 41.27

C.

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

Mailing Address 1908 N. Silver Lake Road

City Arlington Heights State IL Zip Code 60004

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 364.88

Date of Receipt: 05 / 06 / 2011
Transaction ID: A2011-1164865
 Amount of Each Receipt this Period: 41.16

SUBTOTAL of Receipts This Page (optional) ► 123.70

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

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

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

FOR LINE NUMBER: PAGE 96 / 177

(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 1908 N. Silver Lake Road

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 406.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165276

Amount of Each Receipt this Period
41.16

B.

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 Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 531.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164804

Amount of Each Receipt this Period
60.19

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 Vice President & Deputy G

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 591.54

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165215

Amount of Each Receipt this Period
60.19

SUBTOTAL of Receipts This Page (optional) ▶

161.54

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 177
(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)
JOAN M NAUGHTON

Mailing Address 650 MALIBOU

City State Zip Code
PALATINE IL 60074

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 ▼ 200.20

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165194

Amount of Each Receipt this Period
20.14

B.

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

Mailing Address 22622 N. LINDEN DR

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 Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1075.78

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164674

Amount of Each Receipt this Period
120.06

C.

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

Mailing Address 22622 N. LINDEN DR

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 Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1195.84

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165084

Amount of Each Receipt this Period
120.06

SUBTOTAL of Receipts This Page (optional) ► 260.26

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 98 / 177
(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)
PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Human Reso

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 514.75

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164867

Amount of Each Receipt this Period
57.91

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

Mailing Address 22451 THORNBURY CT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Human Reso

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 572.66

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165278

Amount of Each Receipt this Period
57.91

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 ▼ 282.24

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164796

Amount of Each Receipt this Period
31.60

SUBTOTAL of Receipts This Page (optional) ► 147.42

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 177
(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

<p>A. Full Name (Last, First, Middle Initial) THOMAS R NORTON</p> <p>Mailing Address 1423 PIONEER COURT</p> <p>City State Zip Code WAUKEGAN IL 60085</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Human Resource Senior Man</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 313.84</p>	<p>Date of Receipt 05 / 20 / 2011</p> <p>Transaction ID: A2011-1165207</p> <p>Amount of Each Receipt this Period 31.60</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) RICHARD C O'BRIEN</p> <p>Mailing Address 574 S. COUNTRY RIDGE</p> <p>City State Zip Code LAKE ZURICH IL 60047</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Operations Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 205.76</p>	<p>Date of Receipt 05 / 20 / 2011</p> <p>Transaction ID: A2011-1165076</p> <p>Amount of Each Receipt this Period 20.74</p>
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<p>C. Full Name (Last, First, Middle Initial) MICHAEL P O'SHEA</p> <p>Mailing Address 2505 NEWPORT DRIVE</p> <p>City State Zip Code NAPERVILLE IL 60565</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Allstate Insurance Company</p> <p>Occupation Territorial Sales Leader</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 242.37</p>	<p>Date of Receipt 05 / 06 / 2011</p> <p>Transaction ID: A2011-1164577</p> <p>Amount of Each Receipt this Period 26.93</p>
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SUBTOTAL of Receipts This Page (optional)	79.27
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
NAPERVILLE IL 60565

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

Name of Employer Allstate Insurance Company Occupation Territorial Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.30

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164987

Amount of Each Receipt this Period
26.93

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

Mailing Address 5170 BARCROFT DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60010

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 377.54

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164773

Amount of Each Receipt this Period
42.50

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

Mailing Address 5170 BARCROFT DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60010

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.04

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165184

Amount of Each Receipt this Period
42.50

SUBTOTAL of Receipts This Page (optional) ► **111.93**

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 101 / 177
(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)
KENNETH IOMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code
DEERFIELD IL 60015

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 361.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164651

Amount of Each Receipt this Period

40.16

B.

Full Name (Last, First, Middle Initial)
KENNETH IOMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code
DEERFIELD IL 60015

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 401.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165061

Amount of Each Receipt this Period

40.16

C.

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

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Occupation
Allstate Insurance Company AVP PCCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 399.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164643

Amount of Each Receipt this Period

45.16

SUBTOTAL of Receipts This Page (optional) ▶

125.48

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 102 / 177
(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)
PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP PCCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 444.68

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165053

Amount of Each Receipt this Period
45.16

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 AVP Ast General Counsel &

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 407.45

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164609

Amount of Each Receipt this Period
46.25

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 AVP Ast General Counsel &

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 453.70

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165019

Amount of Each Receipt this Period
46.25

SUBTOTAL of Receipts This Page (optional) ► 137.66

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 103 / 177
(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)
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 ▼ 291.22

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164715

Amount of Each Receipt this Period
32.50

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 ▼ 323.72

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165125

Amount of Each Receipt this Period
32.50

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 General Vice President Em

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 706.06

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164600

Amount of Each Receipt this Period
78.98

SUBTOTAL of Receipts This Page (optional) ► 143.98

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 177
	<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	Date of Receipt MM / DD / YYYY 05 / 20 / 2011
	Mailing Address 301 CAMELOT LANE	Transaction ID: A2011-1165010
	City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 78.98
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation General Vice President Em Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 785.04

B.	Full Name (Last, First, Middle Initial) LAURIE PELLOUCHOUD	Date of Receipt MM / DD / YYYY 05 / 06 / 2011
	Mailing Address 1447 PLEASANT	Transaction ID: A2011-1164798
	City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 40.41
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Homeowner Initiative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 358.97

C.	Full Name (Last, First, Middle Initial) LAURIE PELLOUCHOUD	Date of Receipt MM / DD / YYYY 05 / 20 / 2011
	Mailing Address 1447 PLEASANT	Transaction ID: A2011-1165209
	City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 40.41
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Homeowner Initiative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.38

SUBTOTAL of Receipts This Page (optional)	159.80
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 105 / 177
(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)
RONALD J PEPPING
Mailing Address 2721 Acorn Ct.
City State Zip Code
West Dundee IL 60118
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior Sales Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 281.18
Date of Receipt M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 1 1
Transaction ID: A2011-1164751
Amount of Each Receipt this Period 31.38

B. Full Name (Last, First, Middle Initial)
RONALD J PEPPING
Mailing Address 2721 Acorn Ct.
City State Zip Code
West Dundee IL 60118
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Senior Sales Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.56
Date of Receipt M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 1
Transaction ID: A2011-1165162
Amount of Each Receipt this Period 31.38

C. Full Name (Last, First, Middle Initial)
FLORIE S PERELLIS
Mailing Address 1480 MINTHAVEN RD
City State Zip Code
LAKE FOREST IL 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation AVP Ast General Counsel &
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 488.72
Date of Receipt M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 1 1
Transaction ID: A2011-1164570
Amount of Each Receipt this Period 55.48

SUBTOTAL of Receipts This Page (optional) ► 118.24
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 106 / 177
	<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) FLORIE S PERELLIS		Date of Receipt
	Mailing Address 1480 MINTHAVEN RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164980
Name of Employer Allstate Insurance Company		Occupation AVP Ast General 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 ▼ 544.20	<input type="text"/> 55.48

B.	Full Name (Last, First, Middle Initial) NANCY A PERRY		Date of Receipt
	Mailing Address 3575 CALDERWOOD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	ROCKFORD	IL	61114
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1165182
Name of Employer Allstate Insurance Company		Occupation Human Resource 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 ▼ 201.80	<input type="text"/> 20.30

C.	Full Name (Last, First, Middle Initial) THOMAS S PETERSON		Date of Receipt
	Mailing Address 2756 BRECKENRIDGE LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	NAPERVILLE	IL	60565
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164924
Name of Employer Allstate Insurance Company		Occupation CC IT Senior Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 287.03	<input type="text"/> 32.31

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 108.09
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 107 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code
NAPERVILLE IL 60565

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 319.34

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165335
Amount of Each Receipt this Period: 32.31

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 ▼ 671.90

Date of Receipt: 05 / 06 / 2011
Transaction ID: A2011-1164673
Amount of Each Receipt this Period: 64.78

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 ▼ 736.68

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165083
Amount of Each Receipt this Period: 64.78

SUBTOTAL of Receipts This Page (optional) ► 161.87

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
Mark D Pitchford

Mailing Address 653 Hinman Ave

City State Zip Code
Evanston IL 60202

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

Name of Employer
Allstate Insurance Company

Occupation
VP Direct Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
624.62

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164927

Amount of Each Receipt this Period
70.62

B.

Full Name (Last, First, Middle Initial)
Mark D Pitchford

Mailing Address 653 Hinman Ave

City State Zip Code
Evanston IL 60202

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

Name of Employer
Allstate Insurance Company

Occupation
VP Direct Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
695.24

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165338

Amount of Each Receipt this Period
70.62

C.

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

Mailing Address 2816 HAVEN LANE

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
441.26

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164564

Amount of Each Receipt this Period
49.46

SUBTOTAL of Receipts This Page (optional) ► **190.70**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
DAVID J 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 Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 490.72

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164974

Amount of Each Receipt this Period

49.46

B.

Full Name (Last, First, Middle Initial)
THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Sr. Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 213.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164800

Amount of Each Receipt this Period

24.75

C.

Full Name (Last, First, Middle Initial)
THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
DEER PARK IL 60010

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

Name of Employer Occupation
Allstate Insurance Company Sr. Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165211

Amount of Each Receipt this Period

24.75

SUBTOTAL of Receipts This Page (optional)

98.96

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 110 / 177
(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)
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 Occupation
Allstate Insurance Company Product Operations Direct

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 307.63

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164912

Amount of Each Receipt this Period

34.63

B.

Full Name (Last, First, Middle Initial)
JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City State Zip Code
ARLINGTON HGTS IL 60005

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

Name of Employer Occupation
Allstate Insurance Company Product Operations Direct

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 342.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165323

Amount of Each Receipt this Period

34.63

C.

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

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code
ARLINGTON HEIGH IL 60005

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.15

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164828

Amount of Each Receipt this Period

44.31

SUBTOTAL of Receipts This Page (optional)

113.57

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 111 / 177

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code
ARLINGTON HEIGH IL 60005

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

Name of Employer Occupation
Allstate Insurance Company Home Office Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 434.46

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165239

Amount of Each Receipt this Period
44.31

B.

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

Mailing Address 441 KELLY LANE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 416.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164547

Amount of Each Receipt this Period
46.72

C.

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

Mailing Address 441 KELLY LANE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Occupation
Allstate Insurance Company Claim Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 463.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164957

Amount of Each Receipt this Period
46.72

SUBTOTAL of Receipts This Page (optional) ▶

137.75

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 / 177
	<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 P RICE		Date of Receipt
	Mailing Address 618 Burdick St.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	LIBERTYVILLE	IL	60048
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164725
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 ▼	<input type="text"/> 38.96
		<input type="text"/> 347.60	

B.	Full Name (Last, First, Middle Initial) KEVIN P RICE		Date of Receipt
	Mailing Address 618 Burdick St.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	LIBERTYVILLE	IL	60048
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1165135
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 ▼	<input type="text"/> 38.96
		<input type="text"/> 386.56	

C.	Full Name (Last, First, Middle Initial) BRIAN R RICHARD		Date of Receipt
	Mailing Address 37 JOSEPH PLACE		<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
	WAYNE	NJ	07470
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164542
Name of Employer Allstate Insurance Company		Occupation Market Sales Leader	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"/> 26.89
		<input type="text"/> 242.01	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 104.81
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 113 / 177
(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)
BRIAN R RICHARD

Mailing Address 37 JOSEPH PLACE

City State Zip Code
WAYNE NJ 07470

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

Name of Employer Allstate Insurance Company Occupation Market Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 268.90

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164952

Amount of Each Receipt this Period
26.89

B.

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

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
OAK LAWN IL 60453

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

Name of Employer Allstate Insurance Company Occupation AVP Finance and Planning

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 485.12

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164728

Amount of Each Receipt this Period
54.56

C.

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

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
OAK LAWN IL 60453

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

Name of Employer Allstate Insurance Company Occupation AVP Finance and Planning

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 539.68

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165139

Amount of Each Receipt this Period
54.56

SUBTOTAL of Receipts This Page (optional) ► **136.01**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 62 Bart Drive

City State Zip Code
Canton CT 06019

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

Name of Employer Allstate Insurance Company Occupation Territorial Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.07

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164881

Amount of Each Receipt this Period
32.79

B.

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

Mailing Address 62 Bart Drive

City State Zip Code
Canton CT 06019

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

Name of Employer Allstate Insurance Company Occupation Territorial Sales Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.86

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165292

Amount of Each Receipt this Period
32.79

C.

Full Name (Last, First, Middle Initial)
ROGER S ROBINSON

Mailing Address 2014 BENCAL DR. SE

City State Zip Code
ATLANTA GA 30316

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

Name of Employer Allstate Insurance Company Occupation Regional Communications M

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.51

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164634

Amount of Each Receipt this Period
24.01

SUBTOTAL of Receipts This Page (optional) ► **89.59**

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

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

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

FOR LINE NUMBER: PAGE 115 / 177
(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 S ROBINSON

Mailing Address 2014 BENCAL DR. SE

City State Zip Code
ATLANTA GA 30316

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

Name of Employer Occupation
Allstate Insurance Company Regional Communications M

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 232.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165044

Amount of Each Receipt this Period

24.01

B.

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

Mailing Address 270 KINGSWAY DRIVE

City State Zip Code
AURORA IL 60506

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

Name of Employer Occupation
Allstate Insurance Company SVP-P-CCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 946.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164739

Amount of Each Receipt this Period

106.15

C.

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

Mailing Address 270 KINGSWAY DRIVE

City State Zip Code
AURORA IL 60506

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

Name of Employer Occupation
Allstate Insurance Company SVP-P-CCSO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1052.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165150

Amount of Each Receipt this Period

106.15

SUBTOTAL of Receipts This Page (optional) ▶

236.31

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City State Zip Code
RIVER FOREST IL 60305

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 383.59

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164669

Amount of Each Receipt this Period
43.63

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

Mailing Address 106 ASHLAND

City State Zip Code
RIVER FOREST IL 60305

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 427.22

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165079

Amount of Each Receipt this Period
43.63

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

Mailing Address 3371 VENARD RD.

City State Zip Code
DOWNERS GROVE IL 60515

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 352.81

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164772

Amount of Each Receipt this Period
40.05

SUBTOTAL of Receipts This Page (optional) ► **127.31**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JOHN ROSZKOWSKI
Mailing Address 3371 VENARD RD.
City Downers Grove State IL Zip Code 60515
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation CC IT Systems Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 392.86
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165183
Amount of Each Receipt this Period 40.05

B. Full Name (Last, First, Middle Initial)
DOREEN M RYAN
Mailing Address 17 ALSTON COURT
City Red Bank State NJ Zip Code 07701
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Managing Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.17
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164591
Amount of Each Receipt this Period 22.45

C. Full Name (Last, First, Middle Initial)
DOREEN M RYAN
Mailing Address 17 ALSTON COURT
City Red Bank State NJ Zip Code 07701
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Managing Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 223.62
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165001
Amount of Each Receipt this Period 22.45

SUBTOTAL of Receipts This Page (optional) ► 84.95
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PAUL R RYSKE
 Mailing Address 898 E. LONGWOOD DR.
 City State Zip Code
LAKE FOREST IL 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Home Office Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 376.84
 Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164667
 Amount of Each Receipt this Period 42.60

B. Full Name (Last, First, Middle Initial)
PAUL R RYSKE
 Mailing Address 898 E. LONGWOOD DR.
 City State Zip Code
LAKE FOREST IL 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Home Office Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 419.44
 Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165077
 Amount of Each Receipt this Period 42.60

C. Full Name (Last, First, Middle Initial)
MICHAEL A SCARDINA
 Mailing Address 51 SOUTH ROYAL OAK
 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 Asset Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.25
 Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164650
 Amount of Each Receipt this Period 29.64

SUBTOTAL of Receipts This Page (optional) ► 114.84
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 177
(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 SCARDINA

Mailing Address 51 SOUTH ROYAL OAK

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 Asset Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.89

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165060

Amount of Each Receipt this Period
29.64

B. Full Name (Last, First, Middle Initial)
PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 296.91

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164776

Amount of Each Receipt this Period
34.11

C. Full Name (Last, First, Middle Initial)
PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 331.02

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165187

Amount of Each Receipt this Period
34.11

SUBTOTAL of Receipts This Page (optional) ► 97.86

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 177
(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 E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP HR Shared Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 503.86

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164594

Amount of Each Receipt this Period
56.62

B. Full Name (Last, First, Middle Initial)
STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation AVP HR Shared Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.48

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165004

Amount of Each Receipt this Period
56.62

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

Mailing Address 1216 SANDHURST DRIVE

City State Zip Code
BUFFALO GROVE IL 60089

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.52

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164710

Amount of Each Receipt this Period
29.12

SUBTOTAL of Receipts This Page (optional) ► **142.36**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 177
(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 I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City State Zip Code
BUFFALO GROVE IL 60089

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165120

Amount of Each Receipt this Period

29.12

B.

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

Mailing Address 128 Waverly Circle

City State Zip Code
Phoenixville PA 19460

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

Name of Employer Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 456.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164838

Amount of Each Receipt this Period

51.64

C.

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

Mailing Address 128 Waverly Circle

City State Zip Code
Phoenixville PA 19460

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

Name of Employer Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 508.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165249

Amount of Each Receipt this Period

51.64

SUBTOTAL of Receipts This Page (optional)

132.40

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 122 / 177
(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)
STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
Chicago IL 60611

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

Name of Employer Allstate Insurance Company Occupation AVP Corporate Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.33

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164766

Amount of Each Receipt this Period
45.37

B.

Full Name (Last, First, Middle Initial)
STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
Chicago IL 60611

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

Name of Employer Allstate Insurance Company Occupation AVP Corporate Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 446.70

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165177

Amount of Each Receipt this Period
45.37

C.

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

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60189

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 786.79

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164735

Amount of Each Receipt this Period
88.19

SUBTOTAL of Receipts This Page (optional) ► **178.93**

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 123 / 177
(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 E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60189

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 874.98

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165146
Amount of Each Receipt this Period: 88.19

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

Mailing Address 839 SUMAC

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.26

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165072
Amount of Each Receipt this Period: 20.69

C. Full Name (Last, First, Middle Initial)
ADAM R SHORES

Mailing Address 157 Station Park Circle

City State Zip Code
Grayslake IL 60030

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

Name of Employer Allstate Insurance Company Occupation Corporate RelationsCommun

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.07

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165329
Amount of Each Receipt this Period: 20.37

SUBTOTAL of Receipts This Page (optional) ► 129.25

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 177
(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)
DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
FAIR OAKS CA 95628

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

Name of Employer Allstate Insurance Company Occupation Field Product Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.31

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164817

Amount of Each Receipt this Period
22.79

B.

Full Name (Last, First, Middle Initial)
DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
FAIR OAKS CA 95628

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

Name of Employer Allstate Insurance Company Occupation Field Product Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.10

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165228

Amount of Each Receipt this Period
22.79

C.

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

Mailing Address 418 DEUCE DRIVE

City State Zip Code
WALL NJ 07719

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.77

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164586

Amount of Each Receipt this Period
33.93

SUBTOTAL of Receipts This Page (optional) ► 79.51

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 125 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 418 DEUCE DRIVE

City State Zip Code
WALL NJ 07719

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 ▼ 334.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164996

Amount of Each Receipt this Period
33.93

B.

Full Name (Last, First, Middle Initial)
KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 358.77

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164884

Amount of Each Receipt this Period
40.21

C.

Full Name (Last, First, Middle Initial)
KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Occupation
Allstate Insurance Company CC IT Systems Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 398.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165295

Amount of Each Receipt this Period
40.21

SUBTOTAL of Receipts This Page (optional) ▶

114.35

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 126 / 177
(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)
ANNE E SIMPSON
 Mailing Address 632 ONWENTSIA AVENUE
 City State Zip Code
 HIGHLAND PARK IL 60035
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 6 / 2 0 1 1
Transaction ID: A2011-1164671
 Amount of Each Receipt this Period
 27.72
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Tax Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.78

B. Full Name (Last, First, Middle Initial)
ANNE E SIMPSON
 Mailing Address 632 ONWENTSIA AVENUE
 City State Zip Code
 HIGHLAND PARK IL 60035
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 1
Transaction ID: A2011-1165081
 Amount of Each Receipt this Period
 27.72
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allstate Insurance Company Occupation Tax Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.50

C. Full Name (Last, First, Middle Initial)
KIMBERLY J SLOANE
 Mailing Address 378 N. VISTA AVE
 City State Zip Code
 LOMBARD IL 60148
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 6 / 2 0 1 1
Transaction ID: A2011-1164757
 Amount of Each Receipt this Period
 42.19
 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 ▼ 374.79

SUBTOTAL of Receipts This Page (optional) ► 97.63
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 378 N. VISTA AVE

City State Zip Code
LOMBARD IL 60148

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Claim Reserve Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.98

Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165168

Amount of Each Receipt this Period 42.19

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 ▼ 317.06

Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164842

Amount of Each Receipt this Period 35.54

C. Full Name (Last, First, Middle Initial)
CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Insurance Company Occupation Associate Counsel

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.60

Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165253

Amount of Each Receipt this Period 35.54

SUBTOTAL of Receipts This Page (optional) 113.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 177
(check only one)

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

A. Full Name (Last, First, Middle Initial)
RICHARD J SMITH, Jr.
Mailing Address 597 TREETOP LANE

City	State	Zip Code
GURNEE	IL	60031

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

Name of Employer	Occupation
Allstate Insurance Company	Product Operations Direct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.14

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165265
 Amount of Each Receipt this Period: 20.39

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	Occupation
Allstate Insurance Company	Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 297.87

Date of Receipt: 05 / 06 / 2011
Transaction ID: A2011-1164877
 Amount of Each Receipt this Period: 33.95

C. 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	Occupation
Allstate Insurance Company	Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 331.82

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165288
 Amount of Each Receipt this Period: 33.95

SUBTOTAL of Receipts This Page (optional)	▶	88.29
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 / 177
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) STEVEN P SORENSON	Date of Receipt MM / DD / YYYY 05 / 06 / 2011
	Mailing Address 20712 High Ridge Dr	Transaction ID: A2011-1164830
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 85.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Senior Vice President Pro Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 755.66	

B.	Full Name (Last, First, Middle Initial) STEVEN P SORENSON	Date of Receipt MM / DD / YYYY 05 / 20 / 2011
	Mailing Address 20712 High Ridge Dr	Transaction ID: A2011-1165241
	City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 85.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Senior Vice President Pro Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 841.16	

C.	Full Name (Last, First, Middle Initial) KEVIN A SPATARO	Date of Receipt MM / DD / YYYY 05 / 06 / 2011
	Mailing Address 1663 SARATOGA LANE	Transaction ID: A2011-1164794
	City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 35.90
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Vice President Accounting Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 316.26	

SUBTOTAL of Receipts This Page (optional)	206.90
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 130 / 177
(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)
KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Allstate Insurance Company Occupation Vice President Accounting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 352.16

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165205

Amount of Each Receipt this Period
35.90

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

Mailing Address 740 AMBRIA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Allstate Insurance Company Occupation Human Resource Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 347.37

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164607

Amount of Each Receipt this Period
38.85

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 ▼ 386.22

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165017

Amount of Each Receipt this Period
38.85

SUBTOTAL of Receipts This Page (optional) ► **113.60**

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

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

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

FOR LINE NUMBER: PAGE 131 / 177
(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)
BRIAN M SPENCE

Mailing Address 1001 N Vermont St

City State Zip Code
Arlington VA 22201

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

Name of Employer Allstate Insurance Company
Occupation Controller

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 236.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	1

Transaction ID: A2011-1164813

Amount of Each Receipt this Period

26.70

B.

Full Name (Last, First, Middle Initial)
BRIAN M SPENCE

Mailing Address 1001 N Vermont St

City State Zip Code
Arlington VA 22201

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

Name of Employer Allstate Insurance Company
Occupation Controller

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 262.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	1

Transaction ID: A2011-1165224

Amount of Each Receipt this Period

26.70

C.

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

Mailing Address 20 LAKESIDE LANE

City State Zip Code
N. BARRINGTON IL 60010

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 253.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	1

Transaction ID: A2011-1164788

Amount of Each Receipt this Period

28.28

SUBTOTAL of Receipts This Page (optional)

81.68

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 / 177
	<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) JAMES G SPORLEDER		Date of Receipt
	Mailing Address 20 LAKESIDE LANE		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	N. BARRINGTON	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1165199
Name of Employer Allstate Insurance Company		Occupation AVP Ast General 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="281.96"/>	<input type="text" value="28.28"/>

B.	Full Name (Last, First, Middle Initial) MARY SPRINGBERG		Date of Receipt
	Mailing Address 4745 KINGS WAY - NORTH		<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	GURNEE	IL	60031
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164654
Name of Employer Allstate Insurance Company		Occupation AVP Technology Shared Ser	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="460.77"/>	<input type="text" value="52.09"/>

C.	Full Name (Last, First, Middle Initial) MARY SPRINGBERG		Date of Receipt
	Mailing Address 4745 KINGS WAY - NORTH		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	GURNEE	IL	60031
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1165064
Name of Employer Allstate Insurance Company		Occupation AVP Technology Shared Ser	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="512.86"/>	<input type="text" value="52.09"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="132.46"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 177
(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, 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 ▼ 376.85

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164628

Amount of Each Receipt this Period

42.33

B.

Full Name (Last, First, Middle Initial)
EMORY D STEPHENS JR, Jr.

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

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

Name of Employer Allstate Insurance Company Occupation AVP Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 419.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165038

Amount of Each Receipt this Period

42.33

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 ▼ 372.66

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164637

Amount of Each Receipt this Period

41.86

SUBTOTAL of Receipts This Page (optional) ▶

126.52

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 134 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial) GARY S STERE		Date of Receipt MM / DD / YYYY 05 / 20 / 2011
Mailing Address 2015 SELVA MADERA COURT		Transaction ID: A2011-1165047
City ATLANTIC BEACH	State FL	Zip Code 32233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.86
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 ▼ 414.52	

B.

Full Name (Last, First, Middle Initial) MYRON E STOUFFER		Date of Receipt MM / DD / YYYY 05 / 06 / 2011
Mailing Address 1528 JESSICA LANE		Transaction ID: A2011-1164632
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.01
Name of Employer Allstate Insurance Company	Occupation Vice President Product	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.49	

C.

Full Name (Last, First, Middle Initial) MYRON E STOUFFER		Date of Receipt MM / DD / YYYY 05 / 20 / 2011
Mailing Address 1528 JESSICA LANE		Transaction ID: A2011-1165042
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.01
Name of Employer Allstate Insurance Company	Occupation Vice President Product	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.50	

SUBTOTAL of Receipts This Page (optional)	95.88
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 135 / 177
(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)
CHRISTINE A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP PCCSO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.83

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164543

Amount of Each Receipt this Period
26.99

B. Full Name (Last, First, Middle Initial)
CHRISTINE A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP PCCSO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 268.82

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1164953

Amount of Each Receipt this Period
26.99

C. Full Name (Last, First, Middle Initial)
KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation Vice President Auditing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 530.37

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164678

Amount of Each Receipt this Period
59.45

SUBTOTAL of Receipts This Page (optional) ► **113.43**

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 136 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KATHLEEN A SWAIN
Mailing Address 242 HIGHVIEW
City ELMHURST State IL Zip Code 60126
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Vice President Auditing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 589.82
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165088
Amount of Each Receipt this Period 59.45

B. Full Name (Last, First, Middle Initial)
JERROLD S SZOSTAK
Mailing Address 1064 W GLENN TRAIL
City ELK GROVE State IL Zip Code 60007
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Claim Reserve Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 354.69
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164714
Amount of Each Receipt this Period 39.41

C. Full Name (Last, First, Middle Initial)
JERROLD S SZOSTAK
Mailing Address 1064 W GLENN TRAIL
City ELK GROVE State IL Zip Code 60007
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Claim Reserve Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 394.10
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165124
Amount of Each Receipt this Period 39.41

SUBTOTAL of Receipts This Page (optional) ► 138.27
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 / 177
	<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) BENJAMIN A TARVER		Date of Receipt
	Mailing Address 2495 EMERALD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	LINDENHURST	IL	60046
	FEC ID number of contributing federal political committee.		Transaction ID: A2011-1164584
		Amount of Each Receipt this Period	
		<input type="text"/> 24.28	
Name of Employer Allstate Insurance Company		Occupation AVP Corporate Security	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 217.08	

B.	Full Name (Last, First, Middle Initial) BENJAMIN A TARVER		Date of Receipt
	Mailing Address 2495 EMERALD LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	LINDENHURST	IL	60046
	FEC ID number of contributing federal political committee.		Transaction ID: A2011-1164994
		Amount of Each Receipt this Period	
		<input type="text"/> 24.28	
Name of Employer Allstate Insurance Company		Occupation AVP Corporate Security	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 241.36	

C.	Full Name (Last, First, Middle Initial) JANICE M TAYLOR		Date of Receipt
	Mailing Address 7335 ATHLONE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	HOUSTON	TX	77088
	FEC ID number of contributing federal political committee.		Transaction ID: A2011-1164862
		Amount of Each Receipt this Period	
		<input type="text"/> 24.18	
Name of Employer Allstate Insurance Company		Occupation Frontline Performance Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 217.62	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 72.74
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 138 / 177
(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)
JANICE M TAYLOR

Mailing Address 7335 ATHLONE

City State Zip Code
HOUSTON TX 77088

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

Name of Employer Allstate Insurance Company Occupation Frontline Performance Lea

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 241.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165273

Amount of Each Receipt this Period
24.18

B.

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

Mailing Address 604 BRIER STREET

City State Zip Code
KENILWORTH IL 60043

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

Name of Employer Allstate Insurance Company Occupation AVP Administrative Operat

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.19

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164923

Amount of Each Receipt this Period
22.91

C.

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

Mailing Address 604 BRIER STREET

City State Zip Code
KENILWORTH IL 60043

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

Name of Employer Allstate Insurance Company Occupation AVP Administrative Operat

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 223.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165334

Amount of Each Receipt this Period
22.91

SUBTOTAL of Receipts This Page (optional) ▶

70.00

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 139 / 177
(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)
GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

City State Zip Code
CHICAGO IL 60649

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

Name of Employer Occupation
Allstate Insurance Company Communication Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 289.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164716

Amount of Each Receipt this Period

32.34

B.

Full Name (Last, First, Middle Initial)
GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

City State Zip Code
CHICAGO IL 60649

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

Name of Employer Occupation
Allstate Insurance Company Communication Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 321.48

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165126

Amount of Each Receipt this Period

32.34

C.

Full Name (Last, First, Middle Initial)
MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City State Zip Code
CHICAGO IL 60657

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

Name of Employer Occupation
Allstate Insurance Company AVP-Product Non-Standard

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 259.65

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164872

Amount of Each Receipt this Period

29.53

SUBTOTAL of Receipts This Page (optional)

94.21

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 140 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City State Zip Code
CHICAGO IL 60657

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

Name of Employer Occupation
Allstate Insurance Company AVP-Product Non-Standard

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 289.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165283

Amount of Each Receipt this Period

29.53

B.

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

Mailing Address 1104 Spruce Run Drive

City State Zip Code
Roanoke TX 76262

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

Name of Employer Occupation
Allstate Insurance Company Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 383.83

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164626

Amount of Each Receipt this Period

43.75

C.

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

Mailing Address 1104 Spruce Run Drive

City State Zip Code
Roanoke TX 76262

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

Name of Employer Occupation
Allstate Insurance Company Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 427.58

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165036

Amount of Each Receipt this Period

43.75

SUBTOTAL of Receipts This Page (optional) ▶

117.03

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 141 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 531 S ALLEN LANE

City State Zip Code
ARLINGTON HTS IL 60005

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

Name of Employer Allstate Insurance Company Occupation Senior Marketing Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 296.82

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164736

Amount of Each Receipt this Period
32.98

B.

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

Mailing Address 531 S ALLEN LANE

City State Zip Code
ARLINGTON HTS IL 60005

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

Name of Employer Allstate Insurance Company Occupation Senior Marketing Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 329.80

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165147

Amount of Each Receipt this Period
32.98

C.

Full Name (Last, First, Middle Initial)
ROBERT E TRANSON

Mailing Address 2644 N DOUGLAS

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation AVP Strategic Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 273.84

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164726

Amount of Each Receipt this Period
30.56

SUBTOTAL of Receipts This Page (optional) ► 96.52

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

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

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

FOR LINE NUMBER: PAGE 142 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT E TRANSON

Mailing Address 2644 N DOUGLAS

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation AVP Strategic Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.40

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165136

Amount of Each Receipt this Period
30.56

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 Vice President & Assistan

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 536.78

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164733

Amount of Each Receipt this Period
61.18

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

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

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

Name of Employer Allstate Insurance Company Occupation Vice President & Assistan

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 597.96

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165144

Amount of Each Receipt this Period
61.18

SUBTOTAL of Receipts This Page (optional) ► 152.92

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 143 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JOHN W VAN ETTEN

Mailing Address 924 W. Gordon Terrace #3

City State Zip Code
Chicago IL 60613

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

Name of Employer Allstate Insurance Company Occupation Frontline Process Expert

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.17

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165191

Amount of Each Receipt this Period
22.90

B. Full Name (Last, First, Middle Initial)
WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation Claims Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.52

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164677

Amount of Each Receipt this Period
33.88

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

Mailing Address 561 W CROOKED STICK CT

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Allstate Insurance Company Occupation Claims Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.40

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165087

Amount of Each Receipt this Period
33.88

SUBTOTAL of Receipts This Page (optional) ► 90.66

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

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

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

FOR LINE NUMBER: PAGE 144 / 177
(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)
PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City State Zip Code
Wilmette IL 60091

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 582.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164883

Amount of Each Receipt this Period
65.69

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

Mailing Address 2800 Birchwood Avenue

City State Zip Code
Wilmette IL 60091

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 648.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165294

Amount of Each Receipt this Period
65.69

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

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code
BERWYN IL 60402

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 369.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164668

Amount of Each Receipt this Period
41.37

SUBTOTAL of Receipts This Page (optional) ► **172.75**

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 145 / 177
(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 VAVRA

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code
BERWYN IL 60402

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.46

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165078

Amount of Each Receipt this Period
41.37

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

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Allstate Insurance Company Occupation Vice President & Treasure

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 696.05

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164580

Amount of Each Receipt this Period
78.29

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

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Allstate Insurance Company Occupation Vice President & Treasure

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 774.34

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164990

Amount of Each Receipt this Period
78.29

SUBTOTAL of Receipts This Page (optional) ► **197.95**

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 146 / 177
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
JOAN H WALKER

Mailing Address 850 N. Riverwoods Road

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Allstate Insurance Company Occupation SVP-Corporate Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 467.28

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164921

Amount of Each Receipt this Period
51.92

B.

Full Name (Last, First, Middle Initial)
JOAN H WALKER

Mailing Address 850 N. Riverwoods Road

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Allstate Insurance Company Occupation SVP-Corporate Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 519.20

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165332

Amount of Each Receipt this Period
51.92

C.

Full Name (Last, First, Middle Initial)
THOMAS M WARDEN

Mailing Address 770 Bair Island Road #200

City State Zip Code
Redwood City CA 94063

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 ▼ 328.95

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164646

Amount of Each Receipt this Period
36.79

SUBTOTAL of Receipts This Page (optional) ► 140.63

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 147 / 177
(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)
THOMAS M WARDEN

Mailing Address 770 Bair Island Road #200

City State Zip Code
Redwood City CA 94063

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 ▼ 365.74

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165056

Amount of Each Receipt this Period
36.79

B.

Full Name (Last, First, Middle Initial)
EDWIN L WASINGER JR, Jr.

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation Product Operations Direct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.08

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164799

Amount of Each Receipt this Period
19.35

C.

Full Name (Last, First, Middle Initial)
EDWIN L WASINGER JR, Jr.

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation Product Operations Direct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.43

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165210

Amount of Each Receipt this Period
19.35

SUBTOTAL of Receipts This Page (optional) ► **75.49**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 148 / 177
(check only one)

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

A.

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

Mailing Address 1N165 Partridge Dr

City State Zip Code
Wheaton IL 60188

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 586.77

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164940

Amount of Each Receipt this Period
65.77

B.

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

Mailing Address 1N165 Partridge Dr

City State Zip Code
Wheaton IL 60188

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 652.54

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165351

Amount of Each Receipt this Period
65.77

C.

Full Name (Last, First, Middle Initial)
JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Bank Cash Management Dire

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 311.10

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164875

Amount of Each Receipt this Period
35.02

SUBTOTAL of Receipts This Page (optional) ► **166.56**

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 149 / 177
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company Bank Cash Management Dire

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 346.12

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165286

Amount of Each Receipt this Period

35.02

B.

Full Name (Last, First, Middle Initial)
JEANETTE S WELLSANDT

Mailing Address 265 N. 22nd Road

City State Zip Code
Unadilla NE 68454

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

Name of Employer Occupation
Allstate Insurance Company Human Resource Senior Man

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.32

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165298

Amount of Each Receipt this Period

20.60

C.

Full Name (Last, First, Middle Initial)
Lucie White

Mailing Address 1250 Forest Glen Drive

City State Zip Code
Winnetka IL 60093

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

Name of Employer Occupation
Allstate Insurance Company Corporate Relations Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.83

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164943

Amount of Each Receipt this Period

37.63

SUBTOTAL of Receipts This Page (optional)

93.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 150 / 177
(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)
Lucie White

Mailing Address 1250 Forest Glen Drive

City State Zip Code
Winnetka IL 60093

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

Name of Employer Allstate Insurance Company Occupation Corporate Relations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 373.46

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165354

Amount of Each Receipt this Period
37.63

B.

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

Mailing Address 47 Park View Ln

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Allstate Insurance Company Occupation Claims Field Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 319.99

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164863

Amount of Each Receipt this Period
35.71

C.

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

Mailing Address 47 Park View Ln

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Allstate Insurance Company Occupation Claims Field Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.70

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165274

Amount of Each Receipt this Period
35.71

SUBTOTAL of Receipts This Page (optional) ► **109.05**

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 151 / 177
(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)
CYNTHIA A WHITFIELD

Mailing Address 1818 N. Crenshaw Circle

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-Product Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.94

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164993

Amount of Each Receipt this Period
21.81

B.

Full Name (Last, First, Middle Initial)
ROBERT N WHOLF

Mailing Address 847 INTERLAKEN DRIVE

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation Claims Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 217.90

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165063

Amount of Each Receipt this Period
21.79

C.

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

Mailing Address 1120 JESSICA LANE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 323.07

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164692

Amount of Each Receipt this Period
36.43

SUBTOTAL of Receipts This Page (optional) ► **80.03**

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 152 / 177
(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)
JOHN K WILCOX
Mailing Address 1120 JESSICA LANE
City LIBERTYVILLE State IL Zip Code 60048
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Finance Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 359.50
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165102
Amount of Each Receipt this Period 36.43

B. Full Name (Last, First, Middle Initial)
JAMES L WILLCOX
Mailing Address 1562 Sienna Oak Court
City Sandy State UT Zip Code 84092
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Market Claim Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 217.87
Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164629
Amount of Each Receipt this Period 24.83

C. Full Name (Last, First, Middle Initial)
JAMES L WILLCOX
Mailing Address 1562 Sienna Oak Court
City Sandy State UT Zip Code 84092
FEC ID number of contributing federal political committee. **C**
Name of Employer Allstate Insurance Company Occupation Market Claim Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 242.70
Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165039
Amount of Each Receipt this Period 24.83

SUBTOTAL of Receipts This Page (optional) ► 86.09
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 / 177
	<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) JEFFREY W WILLIAMS		Date of Receipt
	Mailing Address 7104 CHARDON 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 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	CLARKSVILLE	MD	21029
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164717
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 ▼ 372.27	<input type="text"/> 41.87

B.	Full Name (Last, First, Middle Initial) JEFFREY W WILLIAMS		Date of Receipt
	Mailing Address 7104 CHARDON 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 0 5 / 2 0 / 2 0 1 1
	City	State	Zip Code
	CLARKSVILLE	MD	21029
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1165127
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 ▼ 414.14	<input type="text"/> 41.87

C.	Full Name (Last, First, Middle Initial) THOMAS J WILSON		Date of Receipt
	Mailing Address 2024 N. MOHAWK		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 6 / 2 0 1 1
	City	State	Zip Code
	CHICAGO	IL	60614
	FEC ID number of contributing federal political committee. C		Transaction ID: A2011-1164824
Name of Employer Allstate Insurance Company		Occupation CEO	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 ▼ 2284.65	<input type="text"/> 253.85

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 337.59
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 154 / 177
(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 CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2538.50

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165235

Amount of Each Receipt this Period
253.85

B.

Full Name (Last, First, Middle Initial)
BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

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

Name of Employer Allstate Insurance Company Occupation Accounting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.02

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165200

Amount of Each Receipt this Period
21.55

C.

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

Mailing Address 28616 Sky Crest Dr

City State Zip Code
Ivanhoe IL 60060

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

Name of Employer Allstate Insurance Company Occupation Claim Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 309.59

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164864

Amount of Each Receipt this Period
35.43

SUBTOTAL of Receipts This Page (optional) ► 310.83

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 155 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 28616 Sky Crest Dr

City State Zip Code
Ivanhoe IL 60060

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

Name of Employer Allstate Insurance Company Occupation Claim Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.02

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165275

Amount of Each Receipt this Period
35.43

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

Mailing Address 7 WELLESLEY COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.68

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164582

Amount of Each Receipt this Period
16.88

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

Mailing Address 7 WELLESLEY COURT

City State Zip Code
HAWTHORN WOODS IL 60047

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.56

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1164992

Amount of Each Receipt this Period
16.88

SUBTOTAL of Receipts This Page (optional) ► 69.19

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

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

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

FOR LINE NUMBER: PAGE 156 / 177
(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)
DONALD F WYATT JR, Jr.
Mailing Address 811 DRESSER DR.
City MT PROSPECT State IL Zip Code 60056
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 05 / 06 / 2011
Transaction ID: A2011-1164696
Amount of Each Receipt this Period: 37.72

Name of Employer: Allstate Insurance Company Occupation: CC IT Systems Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 336.52

B. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR, Jr.
Mailing Address 811 DRESSER DR.
City MT PROSPECT State IL Zip Code 60056
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 05 / 20 / 2011
Transaction ID: A2011-1165106
Amount of Each Receipt this Period: 37.72

Name of Employer: Allstate Insurance Company Occupation: CC IT Systems Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 374.24

C. Full Name (Last, First, Middle Initial)
FLOYD M YAGER
Mailing Address 1610 BIRCH LANE
City PARK RIDGE State IL Zip Code 60068
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 05 / 06 / 2011
Transaction ID: A2011-1164756
Amount of Each Receipt this Period: 58.04

Name of Employer: Allstate Insurance Company Occupation: VP Knowledge Development
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 512.36

SUBTOTAL of Receipts This Page (optional) ► 133.48

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 157 / 177
(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)
FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

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

Name of Employer Allstate Insurance Company Occupation VP Knowledge Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.40

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165167

Amount of Each Receipt this Period
58.04

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

Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

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

Name of Employer Allstate Insurance Company Occupation Vice President Procuremen

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 513.65

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164762

Amount of Each Receipt this Period
57.77

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 Vice President Procuremen

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 571.42

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165173

Amount of Each Receipt this Period
57.77

SUBTOTAL of Receipts This Page (optional) ► **173.58**

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 158 / 177
(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 P YOCIUS

Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Allstate Insurance Company Occupation AVP-Product Pricing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 398.35

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164697

Amount of Each Receipt this Period
44.75

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

Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

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

Name of Employer Allstate Insurance Company Occupation AVP-Product Pricing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 443.10

Date of Receipt
MM / DD / YYYY
05 / 20 / 2011

Transaction ID: A2011-1165107

Amount of Each Receipt this Period
44.75

C. Full Name (Last, First, Middle Initial)
CYNTHIA H YOUNG

Mailing Address 1861 N. Sawgrass Street

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Allstate Insurance Company Occupation VP-Ivantage/Independent A

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.27

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: A2011-1164917

Amount of Each Receipt this Period
111.63

SUBTOTAL of Receipts This Page (optional) ► **201.13**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 159 / 177
(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)
CYNTHIA H YOUNG

Mailing Address 1861 N. Sawgrass Street

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Allstate Insurance Company Occupation VP-Ivantage/Independent A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1111.90

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165328

Amount of Each Receipt this Period
111.63

B. Full Name (Last, First, Middle Initial)
PHILLIP C YOUNG

Mailing Address 2181 APPLE HILL LANE

City State Zip Code
BUFFALO GROVE IL 60089

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

Name of Employer Allstate Insurance Company Occupation Director of Flight Operat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165130

Amount of Each Receipt this Period
20.74

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

Mailing Address 2609 N PINE AVE

City State Zip Code
ARLINGTON HEIGHTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 349.88

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: A2011-1164753

Amount of Each Receipt this Period
40.04

SUBTOTAL of Receipts This Page (optional) ► 172.41

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 160 / 177
(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)
MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City ARLINGTON HEIGHTS State IL Zip Code 60004

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

Name of Employer Allstate Insurance Company Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 389.92

Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165164
Amount of Each Receipt this Period 40.04

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

Mailing Address 1439 STEVENSON DRIVE

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation AVP Allstate Life Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.25

Date of Receipt 05 / 06 / 2011
Transaction ID: A2011-1164841
Amount of Each Receipt this Period 9.61

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

Mailing Address 1439 STEVENSON DRIVE

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Allstate Insurance Company Occupation AVP Allstate Life Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.86

Date of Receipt 05 / 20 / 2011
Transaction ID: A2011-1165252
Amount of Each Receipt this Period 9.61

SUBTOTAL of Receipts This Page (optional) ▶ 59.26

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 161 / 177
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
VILLA PARK IL 60181

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165220

Amount of Each Receipt this Period
20.04

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

Mailing Address 2584 Sutton Lane

City State Zip Code
AURORA IL 60502

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 373.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164834

Amount of Each Receipt this Period
42.59

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

Mailing Address 2584 Sutton Lane

City State Zip Code
AURORA IL 60502

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

Name of Employer Allstate Insurance Company Occupation Home Office Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 416.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165245

Amount of Each Receipt this Period
42.59

SUBTOTAL of Receipts This Page (optional) ► **105.22**

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 162 / 177
(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)
JERRY D ZINKULA

Mailing Address 920 CEDAR LANE

City NORTHBROOK State IL Zip Code 60062

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 ▼ 203.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164873

Amount of Each Receipt this Period
22.56

B.

Full Name (Last, First, Middle Initial)
JERRY D ZINKULA

Mailing Address 920 CEDAR LANE

City NORTHBROOK State IL Zip Code 60062

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 ▼ 225.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	1	1

Transaction ID: A2011-1165284

Amount of Each Receipt this Period
22.56

C.

Full Name (Last, First, Middle Initial)
CARLA D ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City VERNON HILLS State IL Zip Code 60061

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	1	1

Transaction ID: A2011-1164886

Amount of Each Receipt this Period
26.52

SUBTOTAL of Receipts This Page (optional) ► **71.64**

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 163 / 177
 (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)
CARLA D ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
256.64

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 1

Transaction ID: A2011-1165297

Amount of Each Receipt this Period
26.52

SUBTOTAL of Receipts This Page (optional)	▶	26.52
TOTAL This Period (last page this line number only)	▶	20025.13

**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 164 / 177

<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
May bank charge

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: IL District:

Not Applicable

Transaction ID: B385941

Date of Disbursement

05 / 11 / 2011

Amount of Each Disbursement this Period

97.20

SUBTOTAL of Disbursements This Page (optional) ▶

97.20

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

97.20

**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)
Ed Royce for Congress

Mailing Address 217 Third St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name
Ed Royce

Office Sought: House
 Senate
 President

State: CA District: 40

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Transaction ID: B384490
Date of Disbursement

05 / 06 / 2011

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

B.

Full Name (Last, First, Middle Initial)
Ed Royce for Congress

Mailing Address 217 Third St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name
Ed Royce

Office Sought: House
 Senate
 President

State: CA District: 40

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Transaction ID: B384708
Date of Disbursement

05 / 10 / 2011

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

C.

Full Name (Last, First, Middle Initial)
Jim Himes for Congress

Mailing Address 50 E Street SE Suite 1

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name
Jim Himes

Office Sought: House
 Senate
 President

State: CT District: 04

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Transaction ID: B385819
Date of Disbursement

05 / 26 / 2011

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

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)

PAGE 166 / 177

<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) Bilirakis for Congress</p> <p>Mailing Address PO Box 606</p> <p>City Tarpon Springs State FL Zip Code 34688</p> <p>Purpose of Disbursement Contribution Candidate Name Gus Bilirakis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 09</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B385816 Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) ROSKAM PAC</p> <p>Mailing Address 1006 Pendleton St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B384491 Date of Disbursement 05 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Volunteers for Shimkus</p> <p>Mailing Address 700 12th Street NW Ste 700</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution Candidate Name John M Shimkus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B384492 Date of Disbursement 05 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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 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) Manzullo for Congress</p> <p>Mailing Address PO Box 368</p> <p>City Falls Church State VA Zip Code 22040</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Donald Manzullo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IL District: 16</p>	<p>Transaction ID: B385817 Date of Disbursement: 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Hoyer for Congress</p> <p>Mailing Address 4201 Northview Dr. #307</p> <p>City Bowie State MD Zip Code 20716</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Steny H Hoyer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MD District: 05</p>	<p>Transaction ID: B385814 Date of Disbursement: 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Bishop for Congress</p> <p>Mailing Address 209 Pennsylvania Ave. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Tim Bishop</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NY District: 01</p>	<p>Transaction ID: B385815 Date of Disbursement: 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ►

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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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

A.	Full Name (Last, First, Middle Initial) Murphy for Congress		Transaction ID: B385818	
	Mailing Address 700 12th Street NW Ste 700		Date of Disbursement 05 / 26 / 2011	
	City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution		011	
	Candidate Name Tim Murphy		Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: PA	District: 18		

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

11500.00

**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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bobby Denton Campaign Cmte.</p> <hr/> <p>Mailing Address P.O. Box 2545</p> <hr/> <p>City Muscle Shoals State AL Zip Code 35662</p> <hr/> <p>Purpose of Disbursement P-2010 State Senate 01 AL</p> <hr/> <p>Candidate Name Bobby E. Denton</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: B299486 Date of Disbursement <table border="1"> <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>5</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <hr/> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-1000.00</td> </tr> </table> </p> <hr/> <p>Voided: Original check dated 12/22/2009</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	6	/	2	0	1	1	-1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	5	/	0	6	/	2	0	1	1													
-1000.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Seth Hammett Campaign Cmte.</p> <hr/> <p>Mailing Address P.O. Box 1776</p> <hr/> <p>City Andalusia State AL Zip Code 36420</p> <hr/> <p>Purpose of Disbursement P-2010 State House 92 AL</p> <hr/> <p>Candidate Name Seth M. Hammett</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: B299487 Date of Disbursement <table border="1"> <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>5</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <hr/> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-1000.00</td> </tr> </table> </p> <hr/> <p>Voided: Original check dated 12/22/2009</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	6	/	2	0	1	1	-1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	5	/	0	6	/	2	0	1	1													
-1000.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Skinner for Assembly 2012 ID#1334307</p> <hr/> <p>Mailing Address 1005 12th St. Ste. H</p> <hr/> <p>City Sacramento State CA Zip Code 95814</p> <hr/> <p>Purpose of Disbursement P-2012 State House 14 CA</p> <hr/> <p>Candidate Name Nancy Skinner</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: B384138 Date of Disbursement <table border="1"> <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>5</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <hr/> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p> <hr/> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	3	/	2	0	1	1	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	5	/	0	3	/	2	0	1	1													
1000.00																						

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td style="text-align: center;">-1000.00</td></tr></table>	-1000.00
-1000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td style="text-align: center;"> </td></tr></table>	

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) Re-Elect Tony Strickland for Senate 2012</p> <p>Mailing Address 603 East Alton Ave. Ste. H</p> <p>City Santa Ana State CA Zip Code 92705</p> <p>Purpose of Disbursement G-2012 State Senate 19 CA</p> <p>Candidate Name Tony Strickland</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B384137 Date of Disbursement 05 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Lou Correa for Attorney General #1336555</p> <p>Mailing Address 1127 11th St. Ste. 505</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2018 State Att. General CA</p> <p>Candidate Name Lou Correa</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B384972 Date of Disbursement 05 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Tom Harman Bd of Equalization 2014-1334860</p> <p>Mailing Address 2150 River Plaza Dr. Ste. 150</p> <p>City Sacramento State CA Zip Code 95833</p> <p>Purpose of Disbursement P-2014 State Brd. Of Equalization CA</p> <p>Candidate Name Tom Harman</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B385036 Date of Disbursement 05 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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)

PAGE 171 / 177

<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) Ted Lieu for State Senate 2014 ID#1333752</p> <p>Mailing Address 1100 O St. Ste. 200</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2014 State Senate 28 CA</p> <p>Candidate Name Ted Lieu</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B385595 Date of Disbursement 05 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Curren Price for Senate 2014 ID# 1333769</p> <p>Mailing Address 925 L Street #1490</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement P-2014 State Senate 26 CA</p> <p>Candidate Name Curren Price</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B385596 Date of Disbursement 05 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 1300.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Shannon Grove for Assembly 2012 #1336400</p> <p>Mailing Address 4900 California Ave. Ste. 105B</p> <p>City Bakersfield State CA Zip Code 93309</p> <p>Purpose of Disbursement P-2012 State House 32 CA</p> <p>Candidate Name Shannon Grove</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B385812 Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3300.00

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)
Newsom for CA Lt. Gov. 2014 ID#1333762

Mailing Address 1005 12th St. Ste. H

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
P-2014 Lt. Governor CA

Candidate Name
Gavin Newsom

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼

State: District:

Transaction ID: B385809
Date of Disbursement

05 / 26 / 2011

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Edward Lindsay Camp. Cmte.

Mailing Address 1150 Angelo Court

City Atlanta State GA Zip Code 30319

Purpose of Disbursement
P-2010 State House 54 GA

Candidate Name
Edward Lindsay

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: B333011
Date of Disbursement

05 / 06 / 2011

Amount of Each Disbursement this Period

-500.00

Voided: Original check dated 06/29/2010

C. Full Name (Last, First, Middle Initial)
Gary Forby Campaign Fund

Mailing Address PO Box 966

City Benton State IL Zip Code 62812

Purpose of Disbursement
G-2012 State Senate 59 IL

Candidate Name
Gary Forby

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Transaction ID: B299244
Date of Disbursement

05 / 06 / 2011

Amount of Each Disbursement this Period

-500.00

Voided: Original check dated 12/17/2009

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)

PAGE 173 / 177

<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) Gary Forby Campaign Fund <hr/> Mailing Address PO Box 966 <hr/> City Benton State IL Zip Code 62812 <hr/> Purpose of Disbursement P-2012 State Senate 59 IL Candidate Name Gary Forby <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B384489 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Voided: Original check dated 03/10/2010
B. Full Name (Last, First, Middle Initial) Sen Ann Duplessis Campaign Fund <hr/> Mailing Address 6600 Plaza Dr. Suite 211A <hr/> City New Orleans State LA Zip Code 70127 <hr/> Purpose of Disbursement P-2011 State Senate 02 LA Candidate Name Ann Duplessis <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: B324631 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 1 1
	Amount of Each Disbursement this Period -250.00
	Category/ Type 011
	Voided: Original check dated 03/10/2010
C. Full Name (Last, First, Middle Initial) Rep. Legislative Delegation Camp. Cmte. Inc. <hr/> Mailing Address 530 Lakeland Dr. Ste. 215 <hr/> City Baton Rouge State LA Zip Code 70802 <hr/> Purpose of Disbursement State Party Cmte Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	Transaction ID: B385613 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Not Applicable

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
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) House Dem. Campaign Cmte./Donkey Romp	Transaction ID: B385616 Date of Disbursement
	Mailing Address 701 Government Street	<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City State Zip Code Baton Rouge LA 70802	Amount of Each Disbursement this Period
	Purpose of Disbursement State Party Cmte	<input type="text" value="500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) MIC-PAC	Transaction ID: B385813 Date of Disbursement
	Mailing Address 220 Madison St.	<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City State Zip Code Jefferson City MO 65101	Amount of Each Disbursement this Period
	Purpose of Disbursement State PAC	<input type="text" value="1500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) Buck Clarke Campaign Committee	Transaction ID: B384140 Date of Disbursement
	Mailing Address P.O. Box 373	<input type="text" value="05"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City State Zip Code Hollandale MS 38748	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2011 State Senate 22 MS	<input type="text" value="500.00"/>
	Candidate Name Eugene Clarke	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2500.00"/>
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

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) Friends of Tate Reeves	Transaction ID: B384141 Date of Disbursement 05 / 03 / 2011
	Mailing Address PO Box 24355	Amount of Each Disbursement this Period 500.00
	City Jackson State MS Zip Code 39225	
	Purpose of Disbursement P-2011 Lt. Governor MS Candidate Name Tate Reeves 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:	011 Category/ Type

B.	Full Name (Last, First, Middle Initial) Walter Robinson Campaign Committee	Transaction ID: B384139 Date of Disbursement 05 / 03 / 2011
	Mailing Address PO Box 249	Amount of Each Disbursement this Period 500.00
	City Bolton State MS Zip Code 39041	
	Purpose of Disbursement P-2011 State House 63 MS Candidate Name Walter Robinson 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:	011 Category/ Type

C.	Full Name (Last, First, Middle Initial) Walter Robinson Campaign Cmte.	Transaction ID: B344560 Date of Disbursement 05 / 06 / 2011
	Mailing Address PO Box 249	Amount of Each Disbursement this Period -500.00
	City Bolton State MS Zip Code 39041	
	Purpose of Disbursement G-2011 State House 63 MS Candidate Name Walter Robinson Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	011 Category/ Type

Voided: Original check dated 08/10/2010

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Mike Chaney Re-Election Cmte.

Mailing Address PO Box 23242

City Jackson State MS Zip Code 39225

Purpose of Disbursement
G-2011 State Insur. Comm. MS

Candidate Name
Mike Chaney

Office Sought: House Senate President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B385154
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Friends of Bill Beck

Mailing Address P.O. Box 2049

City Whitefish State MT Zip Code 59937

Purpose of Disbursement
G-2010 State House 06 MT

Candidate Name
William (Bill) Beck

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B346326
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Voided: Original check dated 08/30/2010

C. Full Name (Last, First, Middle Initial)
Lautenbaugh for Legislature

Mailing Address 16407 Taylor Street

City Omaha State NE Zip Code 68116

Purpose of Disbursement
G-2010 State Senate 18 NE

Candidate Name
Scott Lautenbaugh

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B345457
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Voided: Original check dated 08/19/2010

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 177 / 177

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Cmte to Re-Elect Sen. Mike Stack

Mailing Address PO Box 391

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement
G-2012 State Senate 05 PA

Candidate Name
Mike Stack

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Transaction ID: B384973

Date of Disbursement

05 / 13 / 2011

Amount of Each Disbursement this Period

500.00

011

Category/
Type

B. Full Name (Last, First, Middle Initial)
Caruth for Senate Cmte.

Mailing Address P.O. Box 280

City Athens State WV Zip Code 24712

Purpose of Disbursement
P-2012 State Senate 10 WV

Candidate Name
Donald T Caruth

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Transaction ID: B294493

Date of Disbursement

05 / 06 / 2011

Amount of Each Disbursement this Period

-250.00

011

Category/
Type

Voided: Original check dated 10/21/2009

SUBTOTAL of Disbursements This Page (optional) ►

250.00

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

12365.00