

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		37795.26
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	46520.15									
(c) Total Receipts (from Line 19)	26824.49	53742.77								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	73344.64	91538.03								
7. Total Disbursements (from Line 31)	10356.37	28549.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62988.27	62988.27								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

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)	6825.64	7944.70
(ii) Unitemized	19998.61	45797.56
(iii) TOTAL (add Lines 11(a)(i) and (ii)	26824.25	53742.26
(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)	26824.25	53742.26
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.24	0.51
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))	26824.49	53742.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	26824.49	53742.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	106.37	299.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	106.37	299.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	28500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	-250.00	-250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10356.37	28549.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10356.37	28549.76

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	26824.25	53742.26
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26824.25	53742.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	106.37	299.76
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	106.37	299.76

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 39
(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)
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 ▼ 222.96

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

Transaction ID: A2010-398013

Amount of Each Receipt this Period
74.32

B.

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 ▼ 297.28

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

Transaction ID: A2010-398462

Amount of Each Receipt this Period
74.32

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 Allstate Insurance Company Occupation AVP Allstate Financial -

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.24

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

Transaction ID: A2010-398883

Amount of Each Receipt this Period
52.56

SUBTOTAL of Receipts This Page (optional) ► 201.20

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

A. Form/Schedule : **SA11AI**

Transaction ID :

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

**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 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) ROBERT H BARGE III, III	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 2222 LOCH WAY	Transaction ID: A2010-398414
	City State Zip Code EL DORADO HILLS CA 95762	Amount of Each Receipt this Period 71.18
	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 ▼ 213.54	

B.	Full Name (Last, First, Middle Initial) ROBERT H BARGE III, III	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 2222 LOCH WAY	Transaction ID: A2010-398861
	City State Zip Code EL DORADO HILLS CA 95762	Amount of Each Receipt this Period 71.18
	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 ▼ 284.72	

C.	Full Name (Last, First, Middle Initial) ROBERT L BLOCK	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 398 Brookmont Lane	Transaction ID: A2010-398783
	City State Zip Code North Barrington IL 60010	Amount of Each Receipt this Period 62.95
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Investor R Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 251.80	

SUBTOTAL of Receipts This Page (optional)	205.31
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 9 / 39
	<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) MICHAEL B BOYLE	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 1063 CHERRY STREET	Transaction ID: A2010-398083
	City State Zip Code WINNETKA IL 60093	Amount of Each Receipt this Period 77.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Info Techn Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 231.87	

B.	Full Name (Last, First, Middle Initial) MICHAEL B BOYLE	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 1063 CHERRY STREET	Transaction ID: A2010-398532
	City State Zip Code WINNETKA IL 60093	Amount of Each Receipt this Period 77.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Info Techn Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 309.16	

C.	Full Name (Last, First, Middle Initial) CATHERINE S BRUNE	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 190 SAVANNA CT	Transaction ID: A2010-398105
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 186.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation SVP & CIO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 558.63	

SUBTOTAL of Receipts This Page (optional)	▶	340.79
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 39
	<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) CATHERINE S BRUNE	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 190 SAVANNA CT	Transaction ID: A2010-398554
	City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 186.21
	FEC ID number of contributing federal political committee. C	
Name of Employer Allstate Insurance Company	Occupation SVP & CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 744.84	

B.	Full Name (Last, First, Middle Initial) CECILE A BUTLER	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 9309 ELIZABETH LANE	Transaction ID: A2010-398003
	City State Zip Code SPRING GROVE IL 60081	Amount of Each Receipt this Period 89.71
	FEC ID number of contributing federal political committee. C	
Name of Employer Allstate Insurance Company	Occupation AVP & Tax Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.13	

C.	Full Name (Last, First, Middle Initial) CECILE A BUTLER	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 9309 ELIZABETH LANE	Transaction ID: A2010-398452
	City State Zip Code SPRING GROVE IL 60081	Amount of Each Receipt this Period 89.71
	FEC ID number of contributing federal political committee. C	
Name of Employer Allstate Insurance Company	Occupation AVP & Tax Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 358.84	

SUBTOTAL of Receipts This Page (optional)	365.63
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 11 / 39

(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)
DANIEL C BUTLER III, III

Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
ALPHARETTA GA 30004

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

Name of Employer Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.36

Date of Receipt

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

Transaction ID: A2010-398553

Amount of Each Receipt this Period

56.34

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 Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.56

Date of Receipt

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

Transaction ID: A2010-398331

Amount of Each Receipt this Period

79.52

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 Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 318.08

Date of Receipt

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

Transaction ID: A2010-398778

Amount of Each Receipt this Period

79.52

SUBTOTAL of Receipts This Page (optional)

215.38

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) WILLIAM G CRIMMINS		Date of Receipt
	Mailing Address 218 S KASPAR		<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 2 / 1 2 / 2 0 1 0
	City	State	Zip Code
	ARLINGTON HGTS.	IL	60005
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398144
Name of Employer Allstate Insurance Company		Occupation Vice President & Deputy G	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 ▼ 227.04	<input type="text"/> 75.68

B.	Full Name (Last, First, Middle Initial) WILLIAM G CRIMMINS		Date of Receipt
	Mailing Address 218 S KASPAR		<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 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	ARLINGTON HGTS.	IL	60005
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398593
Name of Employer Allstate Insurance Company		Occupation Vice President & Deputy G	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 ▼ 302.72	<input type="text"/> 75.68

C.	Full Name (Last, First, Middle Initial) FREDERICK F CRIPE		Date of Receipt
	Mailing Address 277 N. BILTMORE DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 2 / 2 0 1 0
	City	State	Zip Code
	N. BARRINGTON	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398139
Name of Employer Allstate Insurance Company		Occupation SVP & Executive 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 ▼ 267.12	<input type="text"/> 89.04

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 240.40
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 13 / 39
(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)
FREDERICK F CRIPE

Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
N. BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation SVP & Executive Vice Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.16

Date of Receipt: MM / DD / YYYY
02 / 26 / 2010

Transaction ID: A2010-398588

Amount of Each Receipt this Period: 89.04

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 ▼ 212.55

Date of Receipt: MM / DD / YYYY
02 / 12 / 2010

Transaction ID: A2010-398065

Amount of Each Receipt this Period: 70.85

C. 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 ▼ 283.40

Date of Receipt: MM / DD / YYYY
02 / 26 / 2010

Transaction ID: A2010-398514

Amount of Each Receipt this Period: 70.85

SUBTOTAL of Receipts This Page (optional) ► 230.74

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JEFFREY F DEIGL	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 453 PRAIRIE	Transaction ID: A2010-398749
	City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 54.59
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP-Product Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 218.36	

B.	Full Name (Last, First, Middle Initial) SARAH R DONAHUE	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 4147 RFD	Transaction ID: A2010-398723
	City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 57.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP-Product Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 231.68	

C.	Full Name (Last, First, Middle Initial) MICHAEL L ESCOBAR	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 660 BALMORAL LANE	Transaction ID: A2010-398465
	City State Zip Code INVERNESS IL 60067	Amount of Each Receipt this Period 53.75
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP Finance Innovation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional)	166.26
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 15 / 39

(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)
JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City State Zip Code
OAK PARK IL 60302

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 213.44

Date of Receipt

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

Transaction ID: A2010-398581

Amount of Each Receipt this Period

53.36

B.

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

Mailing Address 29030 N Spoon Court

City State Zip Code
Ivanhoe IL 60060

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

Name of Employer Occupation
Allstate Insurance Company Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.14

Date of Receipt

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

Transaction ID: A2010-398124

Amount of Each Receipt this Period

69.38

C.

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

Mailing Address 29030 N Spoon Court

City State Zip Code
Ivanhoe IL 60060

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

Name of Employer Occupation
Allstate Insurance Company Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 277.52

Date of Receipt

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

Transaction ID: A2010-398573

Amount of Each Receipt this Period

69.38

SUBTOTAL of Receipts This Page (optional)

192.12

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 39
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City LINDENHURST State IL Zip Code 60046

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 ▼ 300.78

Date of Receipt: 02 / 12 / 2010
Transaction ID: A2010-398090
 Amount of Each Receipt this Period: 100.26

B.

Full Name (Last, First, Middle Initial)
WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City LINDENHURST State IL Zip Code 60046

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

Name of Employer Allstate Insurance Company Occupation VP-Agency Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.04

Date of Receipt: 02 / 26 / 2010
Transaction ID: A2010-398539
 Amount of Each Receipt this Period: 100.26

C.

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

Mailing Address 3602 FRANKLIN CT.

City CRYSTAL LAKE State IL Zip Code 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 ▼ 243.24

Date of Receipt: 02 / 12 / 2010
Transaction ID: A2010-398175
 Amount of Each Receipt this Period: 81.08

SUBTOTAL of Receipts This Page (optional) ► 281.60

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 17 / 39

(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 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 Occupation
Allstate Insurance Company Vice President Technology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 324.32

Date of Receipt

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

Transaction ID: A2010-398624

Amount of Each Receipt this Period

81.08

B.

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 Occupation
Allstate Insurance Company Vice President Field

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.28

Date of Receipt

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

Transaction ID: A2010-398454

Amount of Each Receipt this Period

50.32

C.

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 Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: A2010-398449

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) ▶

281.40

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 39
	<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)
Joseph Lacher

Mailing Address 2775 Sanders Road Suite A5

City Northbrook State IL Zip Code 60062

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

Name of Employer Allstate Insurance Company Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 02 / 26 / 2010

Transaction ID: A2010-398896

Amount of Each Receipt this Period 150.00

B.

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

Mailing Address 20580 HIGH RIDGE DR.

City KILDEER State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.96

Date of Receipt 02 / 12 / 2010

Transaction ID: A2010-398223

Amount of Each Receipt this Period 69.32

C.

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

Mailing Address 20580 HIGH RIDGE DR.

City KILDEER State IL Zip Code 60047

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 277.28

Date of Receipt 02 / 26 / 2010

Transaction ID: A2010-398670

Amount of Each Receipt this Period 69.32

SUBTOTAL of Receipts This Page (optional) ► 288.64

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) Richard J Law		Date of Receipt
	Mailing Address 3 Jackson Manor Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Phoenix	MD	21131
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398446
Name of Employer Allstate Insurance Company		Occupation Vice President - Presiden	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"/> 117.69
		<input type="text"/> 353.07	

B.	Full Name (Last, First, Middle Initial) Richard J Law		Date of Receipt
	Mailing Address 3 Jackson Manor Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	Phoenix	MD	21131
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398893
Name of Employer Allstate Insurance Company		Occupation Vice President - Presiden	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"/> 117.69
		<input type="text"/> 470.76	

C.	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 2 / 1 2 / 2 0 1 0
	City	State	Zip Code
	WINTER PARK	FL	32789
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398387
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 ▼	<input type="text"/> 78.24
		<input type="text"/> 234.72	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 313.62
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 20 / 39
(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 E LAWSON

Mailing Address 1190 Palmer AVENUE

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.96

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

Transaction ID: A2010-398834

Amount of Each Receipt this Period
78.24

B.

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

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.20

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

Transaction ID: A2010-398868

Amount of Each Receipt this Period
62.30

C.

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

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
BARRINGTON HILL IL 60010

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.84

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

Transaction ID: A2010-398264

Amount of Each Receipt this Period
79.28

SUBTOTAL of Receipts This Page (optional) ► **219.82**

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 21 / 39
(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 Allstate Insurance Company Occupation Vice President & Deputy G

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 317.12

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: A2010-398711

Amount of Each Receipt this Period
79.28

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 Allstate Insurance Company Occupation Vice President & Deputy G

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 223.68

Date of Receipt
MM / DD / YYYY
02 / 26 / 2010

Transaction ID: A2010-398752

Amount of Each Receipt this Period
55.92

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 ▼ 349.62

Date of Receipt
MM / DD / YYYY
02 / 12 / 2010

Transaction ID: A2010-398158

Amount of Each Receipt this Period
116.54

SUBTOTAL of Receipts This Page (optional) ► 251.74

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) DANIEL C NECASTRO	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 22622 N. LINDEN DR	Transaction ID: A2010-398607
	City State Zip Code LAKE BARRINGTON IL 60010	Amount of Each Receipt this Period 116.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Technology Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 466.16	

B.	Full Name (Last, First, Middle Initial) PATRICK K NOLL	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 22451 THORNBURY CT	Transaction ID: A2010-398819
	City State Zip Code DEER PARK IL 60010	Amount of Each Receipt this Period 54.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation Vice President Human Reso Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 216.52	

C.	Full Name (Last, First, Middle Initial) Patrick M O'Brien	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 976 Hampton Park	Transaction ID: A2010-398892
	City State Zip Code Barrington IL 60010	Amount of Each Receipt this Period 64.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP - Emerging Business Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 258.92	

SUBTOTAL of Receipts This Page (optional)	235.40
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 23 / 39
	(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) JAMES L OSBORNE		Date of Receipt
	Mailing Address 1224 ST. WILLIAM		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 2 / 2 0 1 0
	City	State	Zip Code
	LIBERTYVILLE	IL	60048
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Allstate Insurance Company		Occupation Vice President PCCSO Fiel	Transaction ID: A2010-398362
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"/> 207.87	<input type="text"/> 69.29

B.	Full Name (Last, First, Middle Initial) JAMES L OSBORNE		Date of Receipt
	Mailing Address 1224 ST. WILLIAM		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	LIBERTYVILLE	IL	60048
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Allstate Insurance Company		Occupation Vice President PCCSO Fiel	Transaction ID: A2010-398809
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"/> 277.16	<input type="text"/> 69.29

C.	Full Name (Last, First, Middle Initial) CHARLES PAUL		Date of Receipt
	Mailing Address 301 CAMELOT LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 2 / 2 0 1 0
	City	State	Zip Code
	LIBERTYVILLE	IL	60048
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Allstate Insurance Company		Occupation General Vice President Em	Transaction ID: A2010-398066
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"/> 228.78	<input type="text"/> 76.26

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 214.84
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 24 / 39

(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

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

Mailing Address 301 CAMELOT LANE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
Allstate Insurance Company General Vice President Em

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.04

Date of Receipt

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

Transaction ID: A2010-398515

Amount of Each Receipt this Period
76.26

B.

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

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
LAKE FOREST IL 60045

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 206.20

Date of Receipt

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

Transaction ID: A2010-398482

Amount of Each Receipt this Period
51.55

C.

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

Mailing Address 580 SALCEDA DR

City State Zip Code
MUNDELEIN IL 60060

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 203.24

Date of Receipt

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

Transaction ID: A2010-398481

Amount of Each Receipt this Period
50.81

SUBTOTAL of Receipts This Page (optional) ▶

178.62

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) JOHN C PINTOZZI	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 2116 W CHURCHILL ST	Transaction ID: A2010-398157
	City State Zip Code CHICAGO IL 60647	Amount of Each Receipt this Period 71.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Vice President Finance - Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 213.57	

B.	Full Name (Last, First, Middle Initial) JOHN C PINTOZZI	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 2116 W CHURCHILL ST	Transaction ID: A2010-398606
	City State Zip Code CHICAGO IL 60647	Amount of Each Receipt this Period 71.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: Vice President Finance - Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 284.76	

C.	Full Name (Last, First, Middle Initial) Mark D Pitchford	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 653 Hinman Ave	Transaction ID: A2010-398884
	City State Zip Code Evanston IL 60202	Amount of Each Receipt this Period 65.91
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Allstate Insurance Company Occupation: VP Direct Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 263.64	

SUBTOTAL of Receipts This Page (optional)	208.29
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 26 / 39
	<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) JOSEPH J RICHARDSON		Date of Receipt
	Mailing Address 4968 Astor Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Long Grove	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398069
Name of Employer Allstate Insurance Company		Occupation SVP-Protection Distributi	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 243.84	<input type="text"/> 81.28

B.	Full Name (Last, First, Middle Initial) JOSEPH J RICHARDSON		Date of Receipt
	Mailing Address 4968 Astor Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	Long Grove	IL	60047
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398518
Name of Employer Allstate Insurance Company		Occupation SVP-Protection Distributi	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 ▼ 325.12	<input type="text"/> 81.28

C.	Full Name (Last, First, Middle Initial) MICHAEL J ROCHE		Date of Receipt
	Mailing Address 270 KINGSWAY DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 2 / 2 0 1 0
	City	State	Zip Code
	AURORA	IL	60506
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398235
Name of Employer Allstate Insurance Company		Occupation SVP-P-CCSO	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 ▼ 298.92	<input type="text"/> 99.64

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 262.20
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 39
	<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) MICHAEL J ROCHE	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 270 KINGSWAY DRIVE	Transaction ID: A2010-398682
	City State Zip Code AURORA IL 60506	Amount of Each Receipt this Period 99.64
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation SVP-P-CCSO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 398.56	

B.	Full Name (Last, First, Middle Initial) STEPHEN E SCHOLL	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 7 COPPERFIELD DRIVE	Transaction ID: A2010-398509
	City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 54.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation AVP HR Shared Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 216.84	

C.	Full Name (Last, First, Middle Initial) STEVEN E SHEBIK	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 517 ROBINWOOD LANE	Transaction ID: A2010-398228
	City State Zip Code WHEATON IL 60189	Amount of Each Receipt this Period 83.94
	FEC ID number of contributing federal political committee. C	
	Name of Employer Allstate Insurance Company Occupation VP & CFO Allstate Investm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 251.82	

SUBTOTAL of Receipts This Page (optional)	237.79
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 39
	<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	Date of Receipt
	Mailing Address 517 ROBINWOOD LANE	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 6 / 2 0 1 0
	City State Zip Code WHEATON IL 60189	Transaction ID: A2010-398675
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 83.94
	Name of Employer Allstate Insurance Company Occupation VP & CFO Allstate Investm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 335.76	

B.	Full Name (Last, First, Middle Initial) STEVEN P SORENSON	Date of Receipt
	Mailing Address 20712 High Ridge Dr	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 2 / 2 0 1 0
	City State Zip Code KILDEER IL 60047	Transaction ID: A2010-398329
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 79.73
	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 ▼ <input type="text"/> 239.19	

C.	Full Name (Last, First, Middle Initial) STEVEN P SORENSON	Date of Receipt
	Mailing Address 20712 High Ridge Dr	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 6 / 2 0 1 0
	City State Zip Code KILDEER IL 60047	Transaction ID: A2010-398776
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 79.73
	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 ▼ <input type="text"/> 318.92	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 243.40
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: (check only one)	PAGE 29 / 39
	<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)
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 ▼ 227.44

Date of Receipt: MM / DD / YYYY
02 / 26 / 2010

Transaction ID: A2010-398611

Amount of Each Receipt this Period: 56.86

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 ▼ 226.36

Date of Receipt: MM / DD / YYYY
02 / 26 / 2010

Transaction ID: A2010-398673

Amount of Each Receipt this Period: 56.59

C. 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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.88

Date of Receipt: MM / DD / YYYY
02 / 26 / 2010

Transaction ID: A2010-398836

Amount of Each Receipt this Period: 57.72

SUBTOTAL of Receipts This Page (optional) ► 171.17

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 39
(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 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 ▼ 244.58

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

Transaction ID: A2010-398045

Amount of Each Receipt this Period
76.15

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 ▼ 320.73

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

Transaction ID: A2010-398494

Amount of Each Receipt this Period
76.15

C.

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 ▼ 204.24

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

Transaction ID: A2010-398877

Amount of Each Receipt this Period
51.06

SUBTOTAL of Receipts This Page (optional) ► 203.36

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: (check only one)	PAGE 31 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.	Full Name (Last, First, Middle Initial) ANTON WANDERON		Date of Receipt
	Mailing Address 112 BRISTOL 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 0 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	PONTE VEDRA	FL	32082
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398560
Name of Employer Allstate Insurance Company		Occupation AVP-Credit	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 ▼ 253.84	<input type="text"/> 63.46

B.	Full Name (Last, First, Middle Initial) Robert Wasserman		Date of Receipt
	Mailing Address 1N165 Partridge Dr		<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 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	Wheaton	IL	60188
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398895
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 ▼ 253.84	<input type="text"/> 63.46

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 2 / 1 2 / 2 0 1 0
	City	State	Zip Code
	CHICAGO	IL	60614
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398325
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 ▼ 733.86	<input type="text"/> 244.62

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 371.54
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 39
	<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		Date of Receipt
	Mailing Address 2024 N. MOHAWK		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	CHICAGO	IL	60614
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398772
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 ▼ 978.48	<input type="text"/> 244.62

B.	Full Name (Last, First, Middle Initial) FLOYD M YAGER		Date of Receipt
	Mailing Address 1610 BIRCH LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	PARK RIDGE	IL	60068
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398699
Name of Employer Allstate Insurance Company		Occupation VP Knowledge Development	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 ▼ 211.60	<input type="text"/> 52.90

C.	Full Name (Last, First, Middle Initial) LORI J YELVINGTON		Date of Receipt
	Mailing Address 1531 N HIGHLAND AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	ARLINGTON HGTS.	IL	60004
	FEC ID number of contributing federal political committee. C		Transaction ID: A2010-398706
Name of Employer Allstate Insurance Company		Occupation Vice President Procuremen	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 ▼ 216.16	<input type="text"/> 54.04

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 351.56
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 33 / 39
(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 ▼ 327.36

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

Transaction ID: A2010-398427

Amount of Each Receipt this Period
109.12

B. 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 ▼ 436.48

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

Transaction ID: A2010-398874

Amount of Each Receipt this Period
109.12

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

Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
LIBERTYVILLE IL 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 ▼ 201.87

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

Transaction ID: A2010-398341

Amount of Each Receipt this Period
67.29

SUBTOTAL of Receipts This Page (optional) ► 285.53

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 34 / 39
(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 M ZAHARIAS

Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
LIBERTYVILLE IL 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 ▼
269.16

Date of Receipt

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

Transaction ID: A2010-398788

Amount of Each Receipt this Period
67.29

SUBTOTAL of Receipts This Page (optional)	▶	67.29
TOTAL This Period (last page this line number only)	▶	6825.64

**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 35 / 39

<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
February 2010 bank charge.

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District:

Not Applicable

Transaction ID: B317103

Date of Disbursement

02 / 10 / 2010

Amount of Each Disbursement this Period

106.37

SUBTOTAL of Disbursements This Page (optional)

106.37

TOTAL This Period (last page this line number only)

106.37

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) Ed Royce for Congress <hr/> Mailing Address 217 Third Street SE <hr/> City Washington State DC Zip Code 20003 Purpose of Disbursement Contribution Candidate Name Ed Royce Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B315004 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Not Applicable
B. Full Name (Last, First, Middle Initial) McConnell Senate Committee <hr/> Mailing Address 400 N. Capitol St. NW Ste. 585 <hr/> City Washington State DC Zip Code 20001 Purpose of Disbursement Contribution Candidate Name Mitch McConnell Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B315226 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Not Applicable
C. Full Name (Last, First, Middle Initial) House Conservatives Fund <hr/> Mailing Address 228 S Washington St Ste 115 <hr/> City Alexandria State VA Zip Code 22314 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: B315227 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Not Applicable

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	(Empty)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

<p>A. Full Name (Last, First, Middle Initial) The Richard Burr Committee</p> <p>Mailing Address PO Box 5928</p> <p>City Winston-Salem State NC Zip Code 27113</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Richard Burr</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District:</p>	<p>Transaction ID: B315228 Date of Disbursement: <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	3	/	2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	2	3	/	2	0	1	0													
1000.00																						
<p>B. Full Name (Last, First, Middle Initial) Adler for Congress</p> <p>Mailing Address 499 S Capitol St. SW Ste. 422</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name John Adler</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 03</p>	<p>Transaction ID: B315005 Date of Disbursement: <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	9	/	2	0	1	0	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	1	9	/	2	0	1	0													
2000.00																						
<p>C. Full Name (Last, First, Middle Initial) Gerlach for Congress</p> <p>Mailing Address 700 12th Street NW Suite 700</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Jim Gerlach</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 06</p>	<p>Transaction ID: B315003 Date of Disbursement: <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	9	/	2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	1	9	/	2	0	1	0													
1000.00																						

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

A.

Full Name (Last, First, Middle Initial)
DeMint for Senate Committee

Mailing Address PO Box 12425

City Columbia State SC Zip Code 29211

Purpose of Disbursement
Contribution

Candidate Name
James DeMint

Office Sought: House
 Senate
 President

State: SC District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B315007

Date of Disbursement

02 / 19 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Bennett Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City Salt Lake City State UT Zip Code 84101

Purpose of Disbursement
Contribution

Candidate Name
Robert F Bennett

Office Sought: House
 Senate
 President

State: UT District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B315006

Date of Disbursement

02 / 19 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

10500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)
Heckroth for Senate

Mailing Address 1010 Ridgewood Blvd. NW

City Waverly State IA Zip Code 50677

Purpose of Disbursement
P-2010 State Senate 9 IA

Candidate Name
Bill Heckroth

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B295160

Date of Disbursement

02 / 12 / 2010

Amount of Each Disbursement this Period

-250.00

Voided: Original check dated 11/02/2009

SUBTOTAL of Disbursements This Page (optional) ▶

-250.00

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

-250.00