

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 08 01 2006 through 08 31 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Steven C. Verney
Signature of Treasurer Electronically Filed by Steven C. Verney Date 09 19 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		113864.78
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	110168.96									
(c) Total Receipts (from Line 19)	30503.64	266894.73								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	140672.60	380759.51								
7. Total Disbursements (from Line 31)	55507.24	295594.15								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	85165.36	85165.36								
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	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	27504.41	161551.23
(i) Itemized (use Schedule A)	748.48	101338.04
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	28252.89	262889.27
(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)	28252.89	262889.27
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)	2250.00	4000.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.75	5.46
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))	30503.64	266894.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30503.64	266894.73

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	157.24	1394.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	157.24	1394.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19000.00	106500.00
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.....	36350.00	187700.00
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))..	55507.24	295594.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	55507.24	295594.15

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	28252.89	262889.27
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28252.89	262889.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	157.24	1394.15
37. Offsets to Operating Expenditures (from Line 15, page 3)	2250.00	4000.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-2092.76	-2605.85

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. REBECCA A ABEL		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 657 CORAL COURT		Transaction ID: A2006-1164340
City LINDENHURST	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.80
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.80	

Full Name (Last, First, Middle Initial) B. REBECCA A ABEL		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 657 CORAL COURT		Transaction ID: A2006-1358258
City LINDENHURST	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.80
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.60	

Full Name (Last, First, Middle Initial) C. ERNEST D ADAMS		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 33934 N TREELINE CT		Transaction ID: A2006-1164053
City GAGES LAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.32
Name of Employer Allstate Insurance Company	Occupation Field Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.47	

SUBTOTAL of Receipts This Page (optional)	▶	61.92
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 314
	(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

Full Name (Last, First, Middle Initial) A. ERNEST D ADAMS		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 33934 N TREELINE CT		Transaction ID: A2006-1357961
City State Zip Code GAGES LAKE IL 60030	Amount of Each Receipt this Period 18.32	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Field Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.79	

Full Name (Last, First, Middle Initial) B. JONES G ADUKEH		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1226 RIDGEWOOD LANE		Transaction ID: A2006-1164258
City State Zip Code LAKE VILLA IL 60046	Amount of Each Receipt this Period 27.69	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.74	

Full Name (Last, First, Middle Initial) C. LORA L ADUKEH		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1226 RIDGEWOOD LANE		Transaction ID: A2006-1164324
City State Zip Code LAKE VILLA IL 60046	Amount of Each Receipt this Period 30.10	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.80	

SUBTOTAL of Receipts This Page (optional) ▶	76.11
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JONES G ADUKEH		Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2006	
Mailing Address 1226 RIDGEWOOD LANE		Transaction ID: A2006-1358173	
City State Zip Code LAKE VILLA IL 60046	Amount of Each Receipt this Period 27.69		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.43		

Full Name (Last, First, Middle Initial) B. LORAL ADUKEH		Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2006	
Mailing Address 1226 RIDGEWOOD LANE		Transaction ID: A2006-1358242	
City State Zip Code LAKE VILLA IL 60046	Amount of Each Receipt this Period 30.10		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 505.90		

Full Name (Last, First, Middle Initial) C. MICHAEL W AGAR		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006	
Mailing Address 200 W MILL VALLEY DR		Transaction ID: A2006-1164226	
City State Zip Code COLLEYVILLE TX 76034	Amount of Each Receipt this Period 16.35		
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 ▼ 259.10		

SUBTOTAL of Receipts This Page (optional) ▶	74.14
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 314
	(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

Full Name (Last, First, Middle Initial) A. MICHAEL W AGAR		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 200 W MILL VALLEY DR		Transaction ID: A2006-1358136	
City State Zip Code COLLEYVILLE TX 76034		Amount of Each Receipt this Period 16.35	
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 ▼ 275.45	

Full Name (Last, First, Middle Initial) B. ERIKA S AHERN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 143 EAST WOOD STREET		Transaction ID: A2006-1163926	
City State Zip Code PALATINE IL 60067		Amount of Each Receipt this Period 21.82	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Assistant Counsel III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 343.42	

Full Name (Last, First, Middle Initial) C. ERIKA S AHERN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 143 EAST WOOD STREET		Transaction ID: A2006-1357828	
City State Zip Code PALATINE IL 60067		Amount of Each Receipt this Period 21.82	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Assistant Counsel III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.24	

SUBTOTAL of Receipts This Page (optional) ▶	59.99
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PATRICIA A AITKEN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1245 CARIBOU LANE		Transaction ID: A2006-1164089	
City HOFFMAN ESTATES	State IL	Amount of Each Receipt this Period 19.92	
Zip Code 60192			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.73		

Full Name (Last, First, Middle Initial) B. PATRICIA A AITKEN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1245 CARIBOU LANE		Transaction ID: A2006-1357997	
City HOFFMAN ESTATES	State IL	Amount of Each Receipt this Period 19.92	
Zip Code 60192			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.65		

Full Name (Last, First, Middle Initial) C. NANCY H ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-1164098	
City HAWTHORN WOODS	State IL	Amount of Each Receipt this Period 27.14	
Zip Code 60047			
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Accounting Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 429.64		

SUBTOTAL of Receipts This Page (optional) ▶	66.98
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. NANCY H ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-1358006
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 27.14	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Accounting Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.78	

Full Name (Last, First, Middle Initial) B. WILLIAM H AYO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1009 LAKE RIDGE DR.		Transaction ID: A2006-1164037
City State Zip Code SAFETY HARBOR FL 34695	Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Human Resource Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.60	

Full Name (Last, First, Middle Initial) C. WILLIAM H AYO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1009 LAKE RIDGE DR.		Transaction ID: A2006-1357945
City State Zip Code SAFETY HARBOR FL 34695	Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Human Resource Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.95	

SUBTOTAL of Receipts This Page (optional) ▶	59.84
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN P BADER		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 438 MITCHELL DRIVE		Transaction ID: A2006-1163920
City GRAYS LAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 64.50
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 ▼ 996.58	

Full Name (Last, First, Middle Initial) B. JOHN P BADER		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 438 MITCHELL DRIVE		Transaction ID: A2006-1357822
City GRAYS LAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 64.50
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 ▼ 1061.08	

Full Name (Last, First, Middle Initial) C. CHARLES C BAGGS		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 4435 SWILCAN BRIDGE LANE		Transaction ID: A2006-1164022
City JACKSONVILLE	State FL	Zip Code 32224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.66
Name of Employer Allstate Insurance Company	Occupation AVP-Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.54	

SUBTOTAL of Receipts This Page (optional)	158.66
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CHARLES C BAGGS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 4435 SWILCAN BRIDGE LANE		Transaction ID: A2006-1357929
City State Zip Code JACKSONVILLE FL 32224	Amount of Each Receipt this Period 29.66	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP-Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 498.20	

Full Name (Last, First, Middle Initial) B. DIANE G BAKER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 120 EAST SHERIDAN RD		Transaction ID: A2006-1164017
City State Zip Code LAKE BLUFF IL 60044	Amount of Each Receipt this Period 46.36	
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 ▼ 726.36	

Full Name (Last, First, Middle Initial) C. RICHARD L BAKER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1125 W ACORN TRAIL		Transaction ID: A2006-1164066
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 156.48	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Internal S	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1041.52	

SUBTOTAL of Receipts This Page (optional) ▶	232.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT Z BAKER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 3012 THORNHILL DRIVE		Transaction ID: A2006-1164354
City State Zip Code GRANITE BAY CA 95746	Amount of Each Receipt this Period 16.01	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.11	

Full Name (Last, First, Middle Initial) B. DIANE G BAKER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 120 EAST SHERIDAN RD		Transaction ID: A2006-1357923
City State Zip Code LAKE BLUFF IL 60044	Amount of Each Receipt this Period 46.36	
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 ▼ 772.72	

Full Name (Last, First, Middle Initial) C. ROBERT Z BAKER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 3012 THORNHILL DRIVE		Transaction ID: A2006-1358272
City State Zip Code GRANITE BAY CA 95746	Amount of Each Receipt this Period 16.01	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.12	

SUBTOTAL of Receipts This Page (optional) ▶	78.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. GARRY J BALLEK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1013 MASON LANE		Transaction ID: A2006-1164157
City State Zip Code LAKE IN THE HIL IL 60156	Amount of Each Receipt this Period 18.80	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Unclassified Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.85	

Full Name (Last, First, Middle Initial) B. GARRY J BALLEK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1013 MASON LANE		Transaction ID: A2006-1358065
City State Zip Code LAKE IN THE HIL IL 60156	Amount of Each Receipt this Period 18.80	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Unclassified Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.65	

Full Name (Last, First, Middle Initial) C. WILLIAM P BALLINGER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 47530 ABERDEEN DR		Transaction ID: A2006-1163993
City State Zip Code NOVI MI 48374	Amount of Each Receipt this Period 32.31	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation FVP President New Jersey	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 515.72	

SUBTOTAL of Receipts This Page (optional) ▶	69.91
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 47530 ABERDEEN DR

City State Zip Code
NOVI MI 48374

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

Name of Employer Allstate Insurance Company Occupation FVP President New Jersey

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 548.03

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357899

Amount of Each Receipt this Period
32.31

B. Full Name (Last, First, Middle Initial)
ROBERT H BARGE 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 ▼ 967.32

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164338

Amount of Each Receipt this Period
61.49

C. Full Name (Last, First, Middle Initial)
ROBERT H BARGE 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 ▼ 1028.81

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358256

Amount of Each Receipt this Period
61.49

SUBTOTAL of Receipts This Page (optional) ► 155.29

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 314
	<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)
PATRICK J BARKLEY

Mailing Address 1694 WARRINGTON LANE

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Allstate Insurance Company Occupation Consultant-M1400

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.36

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164118

Amount of Each Receipt this Period
15.46

B. Full Name (Last, First, Middle Initial)
PATRICK J BARKLEY

Mailing Address 1694 WARRINGTON LANE

City State Zip Code
CRYSTAL LAKE IL 60014

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

Name of Employer Allstate Insurance Company Occupation Consultant-M1400

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.82

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358027

Amount of Each Receipt this Period
15.46

C. Full Name (Last, First, Middle Initial)
DAVID J BAUMGARDNER

Mailing Address 12620 Lake Normandy Lane

City State Zip Code
Fairfax VA 22030

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.97

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164064

Amount of Each Receipt this Period
23.72

SUBTOTAL of Receipts This Page (optional)	▶	54.64
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 314
	<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)
DAVID J BAUMGARDNER

Mailing Address 12620 Lake Normandy Lane

City State Zip Code
Fairfax VA 22030

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 398.69

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357971

Amount of Each Receipt this Period
23.72

B. Full Name (Last, First, Middle Initial)
ROBERT K BECKER

Mailing Address 80 RAVINE DRIVE

City State Zip Code
COLONIA NJ 07067

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 318.08

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1163939

Amount of Each Receipt this Period
19.88

C. Full Name (Last, First, Middle Initial)
ROBERT K BECKER

Mailing Address 80 RAVINE DRIVE

City State Zip Code
COLONIA NJ 07067

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

Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.96

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357841

Amount of Each Receipt this Period
19.88

SUBTOTAL of Receipts This Page (optional)	▶	63.48
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CANDICE L BEINLICH		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1781 TUDOR LANE # 309		Transaction ID: A2006-1164113	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 17.94
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.44		

Full Name (Last, First, Middle Initial) B. CANDICE L BEINLICH		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1781 TUDOR LANE # 309		Transaction ID: A2006-1358022	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 17.94
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.38		

Full Name (Last, First, Middle Initial) C. DIANE BELLAS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 632 Concord Way		Transaction ID: A2006-1164120	
City Prospect Heights	State IL	Zip Code 60070	Amount of Each Receipt this Period 23.31
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 ▼ 367.61		

SUBTOTAL of Receipts This Page (optional) ▶	59.19
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DIANE BELLAS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 632 Concord Way		Transaction ID: A2006-1358029	
City State Zip Code Prospect Heights IL 60070	Amount of Each Receipt this Period 23.31		
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 ▼ 390.92		

Full Name (Last, First, Middle Initial) B. WALTER A BERKOWICZ		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 405 GATESHEAD DRIVE		Transaction ID: A2006-1164189	
City State Zip Code NAPERVILLE IL 60565	Amount of Each Receipt this Period 30.54		
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 ▼ 482.74		

Full Name (Last, First, Middle Initial) C. WALTER A BERKOWICZ		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 405 GATESHEAD DRIVE		Transaction ID: A2006-1358098	
City State Zip Code NAPERVILLE IL 60565	Amount of Each Receipt this Period 30.54		
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 ▼ 513.28		

SUBTOTAL of Receipts This Page (optional) ▶	84.39
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 314
	(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

Full Name (Last, First, Middle Initial) A. EDWARD A BIEMER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 807 Greenwood Ave.		Transaction ID: A2006-1163959	
City State Zip Code GLENCOE IL 60022	Amount of Each Receipt this Period 37.71		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation VP and President Broker D		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 591.95		

Full Name (Last, First, Middle Initial) B. EDWARD A BIEMER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 807 Greenwood Ave.		Transaction ID: A2006-1357863	
City State Zip Code GLENCOE IL 60022	Amount of Each Receipt this Period 37.71		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation VP and President Broker D		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 629.66		

Full Name (Last, First, Middle Initial) C. DAVID G BIEMILLER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 480 LEES LAKE RD		Transaction ID: A2006-1164038	
City State Zip Code FAYETTEVILLE GA 30214	Amount of Each Receipt this Period 18.63		
FEC ID number of contributing federal political committee. C			
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 ▼ 294.48		

SUBTOTAL of Receipts This Page (optional) ▶	94.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 314
	(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

Full Name (Last, First, Middle Initial) A. DAVID G BIEMILLER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 480 LEES LAKE RD		Transaction ID: A2006-1357946
City State Zip Code FAYETTEVILLE GA 30214	Amount of Each Receipt this Period 18.63	
FEC ID number of contributing federal political committee. C		
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 ▼ 313.11	

Full Name (Last, First, Middle Initial) B. DAVID A BIRD		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 24567 HARBOUR VIEW DRIVE		Transaction ID: A2006-1164261
City State Zip Code PONTE VEDRA BEA FL 32082	Amount of Each Receipt this Period 37.28	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation President-Allstate Workpl	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.11	

Full Name (Last, First, Middle Initial) C. DAVID A BIRD		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 24567 HARBOUR VIEW DRIVE		Transaction ID: A2006-1358176
City State Zip Code PONTE VEDRA BEA FL 32082	Amount of Each Receipt this Period 37.28	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation President-Allstate Workpl	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 627.39	

SUBTOTAL of Receipts This Page (optional) ▶	93.19
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT L BLOCK		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 398 Brookmont Lane		Transaction ID: A2006-1164248
City State Zip Code North Barrington IL 60010	Amount of Each Receipt this Period 57.33	
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 ▼ 901.74	

Full Name (Last, First, Middle Initial) B. ROBERT L BLOCK		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 398 Brookmont Lane		Transaction ID: A2006-1358163
City State Zip Code North Barrington IL 60010	Amount of Each Receipt this Period 57.33	
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 ▼ 959.07	

Full Name (Last, First, Middle Initial) C. CHARLES A BOLLINGER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 509 GATES HEAD SOUTH		Transaction ID: A2006-1164072
City State Zip Code ELK GROVE VLLGE IL 60007	Amount of Each Receipt this Period 46.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Sales Agen	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 709.71	

SUBTOTAL of Receipts This Page (optional) ▶	160.81
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 509 GATES HEAD SOUTH

City State Zip Code
ELK GROVE VLLGE IL 60007

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

Name of Employer Allstate Insurance Company Occupation Vice President Sales Agen

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 755.86

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357980

Amount of Each Receipt this Period
46.15

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

Mailing Address 1246 PRAIRIE ORCHID LANE

City State Zip Code
GRAYSLAKE IL 60030

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 413.82

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164217

Amount of Each Receipt this Period
26.17

C. Full Name (Last, First, Middle Initial)
MICHAEL E BOND

Mailing Address 1246 PRAIRIE ORCHID LANE

City State Zip Code
GRAYSLAKE IL 60030

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 439.99

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358127

Amount of Each Receipt this Period
26.17

SUBTOTAL of Receipts This Page (optional)	▶	98.49
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 314
	(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

Full Name (Last, First, Middle Initial) A. CAROL L BONOVIICH		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 6 N. MILLERS LANE		Transaction ID: A2006-1164178	
City State Zip Code MT. PROSPECT IL 60056	Amount of Each Receipt this Period 15.86		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.36		

Full Name (Last, First, Middle Initial) B. CAROL L BONOVIICH		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 6 N. MILLERS LANE		Transaction ID: A2006-1358087	
City State Zip Code MT. PROSPECT IL 60056	Amount of Each Receipt this Period 15.86		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.22		

Full Name (Last, First, Middle Initial) C. DOUGLAS L BORG		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 5550 Maybeck Ln		Transaction ID: A2006-1164335	
City State Zip Code Livermore CA 94550	Amount of Each Receipt this Period 24.40		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60		

SUBTOTAL of Receipts This Page (optional) ▶	56.12
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DOUGLAS L BORG		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 5550 Maybeck Ln		Transaction ID: A2006-1358253	
City State Zip Code Livermore CA 94550	Amount of Each Receipt this Period 24.40		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 409.00		

Full Name (Last, First, Middle Initial) B. MICHAEL B BOYLE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1063 CHERRY STREET		Transaction ID: A2006-1163997	
City State Zip Code WINNETKA IL 60093	Amount of Each Receipt this Period 71.08		
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 ▼ 1120.48		

Full Name (Last, First, Middle Initial) C. MICHAEL B BOYLE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1063 CHERRY STREET		Transaction ID: A2006-1357903	
City State Zip Code WINNETKA IL 60093	Amount of Each Receipt this Period 71.08		
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 ▼ 1191.56		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 314
	<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)
RONALD E BRABEC

Mailing Address 2823 TIMBER HILL DR.

City State Zip Code
GRAPEVINE TX 76051

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 ▼ 220.08

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164283

Amount of Each Receipt this Period
13.88

B. Full Name (Last, First, Middle Initial)
RONALD E BRABEC

Mailing Address 2823 TIMBER HILL DR.

City State Zip Code
GRAPEVINE TX 76051

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 ▼ 233.96

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358200

Amount of Each Receipt this Period
13.88

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

Mailing Address 1951 BROADSMORE

City State Zip Code
ALGONQUIN IL 60102

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.98

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164301

Amount of Each Receipt this Period
19.63

SUBTOTAL of Receipts This Page (optional) ► 47.39

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 314
	(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

Full Name (Last, First, Middle Initial) A. LONDON B BRADLEY		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1951 BROADSMORE		Transaction ID: A2006-1358218
City State Zip Code ALGONQUIN IL 60102	Amount of Each Receipt this Period 19.63	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.61	

Full Name (Last, First, Middle Initial) B. KENNETH A BRANCH		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 28955 NIBLICK KNOLL CT.		Transaction ID: A2006-1164267
City State Zip Code IVANHOE IL 60060	Amount of Each Receipt this Period 19.84	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.33	

Full Name (Last, First, Middle Initial) C. KENNETH A BRANCH		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 28955 NIBLICK KNOLL CT.		Transaction ID: A2006-1358182
City State Zip Code IVANHOE IL 60060	Amount of Each Receipt this Period 19.84	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 329.17	

SUBTOTAL of Receipts This Page (optional) ▶	59.31
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 314
	<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)
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 ▼ 303.98

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164143

Amount of Each Receipt this Period
19.23

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 ▼ 323.21

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358051

Amount of Each Receipt this Period
19.23

C. Full Name (Last, First, Middle Initial)
SHEILA M BREEDING

Mailing Address 35 FAIRMONT AVENUE

City State Zip Code
SOMERVILLE NJ 08876

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 ▼ 278.33

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163944

Amount of Each Receipt this Period
16.35

SUBTOTAL of Receipts This Page (optional)	▶	54.81
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SHEILA M BREEDING		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 35 FAIRMONT AVENUE		Transaction ID: A2006-1357846	
City State Zip Code SOMERVILLE NJ 08876	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Field Corporate Re		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.68		

Full Name (Last, First, Middle Initial) B. DUDLEY R BRIGHT		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 18135 W MEANDER DR		Transaction ID: A2006-1163980	
City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 17.49		
FEC ID number of contributing federal political committee. C			
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 ▼ 277.29		

Full Name (Last, First, Middle Initial) C. DUDLEY R BRIGHT		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 18135 W MEANDER DR		Transaction ID: A2006-1357886	
City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 17.49		
FEC ID number of contributing federal political committee. C			
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 ▼ 294.78		

SUBTOTAL of Receipts This Page (optional) ▶	51.33
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SHAWN L BROADFIELD		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1044 APPLE BLOSSOM COURT		Transaction ID: A2006-1164130
City LAKE ZURICH	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.19
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 ▼ 587.89	

Full Name (Last, First, Middle Initial) B. SHAWN L BROADFIELD		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1044 APPLE BLOSSOM COURT		Transaction ID: A2006-1358038
City LAKE ZURICH	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.19
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 ▼ 625.08	

Full Name (Last, First, Middle Initial) C. DAVID C BROCK		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 305 CHURCHILL LANE		Transaction ID: A2006-1164006
City GURNEE	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.47
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Planning Con	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 529.42	

SUBTOTAL of Receipts This Page (optional)	107.85
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 314
	<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)
J D BROCK

Mailing Address 4958 DAY LILY WAY

City ACWORTH State GA Zip Code 30102

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 ▼ 505.27

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164266

Amount of Each Receipt this Period
31.87

B. Full Name (Last, First, Middle Initial)
DAVID C BROCK

Mailing Address 305 CHURCHILL LANE

City GURNEE State IL Zip Code 60031

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 562.89

Date of Receipt
08 / 18 / 2006

Transaction ID: A2006-1357912

Amount of Each Receipt this Period
33.47

C. Full Name (Last, First, Middle Initial)
J D BROCK

Mailing Address 4958 DAY LILY WAY

City ACWORTH State GA Zip Code 30102

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 ▼ 537.14

Date of Receipt
08 / 18 / 2006

Transaction ID: A2006-1358181

Amount of Each Receipt this Period
31.87

SUBTOTAL of Receipts This Page (optional)	▶	97.21
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM F BROKAW		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 3 MILTON CT		Transaction ID: A2006-1164124	
City State Zip Code CARY IL 60013	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.08		

Full Name (Last, First, Middle Initial) B. WILLIAM F BROKAW		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 3 MILTON CT		Transaction ID: A2006-1358033	
City State Zip Code CARY IL 60013	Amount of Each Receipt this Period 19.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.96		

Full Name (Last, First, Middle Initial) C. WILLIAM J BROOKS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 121 HOLLENDEN LANE		Transaction ID: A2006-1164035	
City State Zip Code MADISON MS 39110	Amount of Each Receipt this Period 25.47		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.82		

SUBTOTAL of Receipts This Page (optional) ▶	65.23
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 314
	(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

Full Name (Last, First, Middle Initial) A. WILLIAM J BROOKS		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 121 HOLLENDEN LANE		Transaction ID: A2006-1357943
City MADISON	State MS	Zip Code 39110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.47
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 429.29	

Full Name (Last, First, Middle Initial) B. LORRIE K BROUSE		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 223 POLK PLACE DRIVE		Transaction ID: A2006-1164009
City FRANKLIN	State TN	Zip Code 37064
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.62
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 ▼ 262.52	

Full Name (Last, First, Middle Initial) C. LORRIE K BROUSE		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 223 POLK PLACE DRIVE		Transaction ID: A2006-1357915
City FRANKLIN	State TN	Zip Code 37064
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.62
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 ▼ 279.14	

SUBTOTAL of Receipts This Page (optional)	▶	58.71
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL E BROWN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 8739 CYPRESS RESERVE CIRCLE		Transaction ID: A2006-1163961	
City State Zip Code ORLANDO FL 32836	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Agency Consulting Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.60		

Full Name (Last, First, Middle Initial) B. BETH A BROWN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2637 W. WILSON AVE.		Transaction ID: A2006-1164075	
City State Zip Code CHICAGO IL 60625	Amount of Each Receipt this Period 39.77		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 636.32		

Full Name (Last, First, Middle Initial) C. PAMELA S BROWN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 5886 TEAL LANE		Transaction ID: A2006-1164224	
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 19.86		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.71		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 314
	(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

Full Name (Last, First, Middle Initial) A. MICHAEL E BROWN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 8739 CYPRESS RESERVE CIRCLE		Transaction ID: A2006-1357865	
City ORLANDO	State FL	Zip Code 32836	Amount of Each Receipt this Period 16.35
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Agency Consulting Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.95		

Full Name (Last, First, Middle Initial) B. PATRICIA A BROWN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 9502 STONEY RIDGE ROAD		Transaction ID: A2006-1357898	
City SPRINGDALE	State MD	Zip Code 20774	Amount of Each Receipt this Period 12.36
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.32		

Full Name (Last, First, Middle Initial) C. BETH A BROWN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2637 W. WILSON AVE.		Transaction ID: A2006-1357983	
City CHICAGO	State IL	Zip Code 60625	Amount of Each Receipt this Period 19.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 656.20		

SUBTOTAL of Receipts This Page (optional) ▶	48.59
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAMELA S BROWN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 5886 TEAL LANE		Transaction ID: A2006-1358134	
City LONG GROVE	State IL	Zip Code 60047	Amount of Each Receipt this Period 19.86
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.57		

Full Name (Last, First, Middle Initial) B. CATHERINE S BRUNE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 190 SAVANNA CT		Transaction ID: A2006-1164021	
City LAKE FOREST	State IL	Zip Code 60045	Amount of Each Receipt this Period 161.54
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP & Chief Information O		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2530.81		

Full Name (Last, First, Middle Initial) C. CATHERINE S BRUNE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 190 SAVANNA CT		Transaction ID: A2006-1357928	
City LAKE FOREST	State IL	Zip Code 60045	Amount of Each Receipt this Period 161.54
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP & Chief Information O		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2692.35		

SUBTOTAL of Receipts This Page (optional) ▶	342.94
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 314
	(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

Full Name (Last, First, Middle Initial) A. ANNE MARIE L BRUNNER		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 2514 SOUTH WESLEY AVE		Transaction ID: A2006-1164125
City State Zip Code BERWYN IL 60402	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 33.54
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 ▼ 531.79	

Full Name (Last, First, Middle Initial) B. ANNE MARIE L BRUNNER		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 2514 SOUTH WESLEY AVE		Transaction ID: A2006-1358034
City State Zip Code BERWYN IL 60402	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 33.54
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 ▼ 565.33	

Full Name (Last, First, Middle Initial) C. JOHN C BRUSE		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1434 WOODACRE DRIVE		Transaction ID: A2006-1164313
City State Zip Code MC LEAN VA 22101	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 34.00
Name of Employer Allstate Insurance Company	Occupation Vice President & Ast Gene	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 503.82	

SUBTOTAL of Receipts This Page (optional)	101.08
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 314
	<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)
JOHN C BRUSE

Mailing Address 1434 WOODACRE DRIVE

City State Zip Code
MC LEAN VA 22101

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

Name of Employer Allstate Insurance Company Occupation Vice President & Ast Gene

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 537.82

Date of Receipt
08 / 18 / 2006

Transaction ID: A2006-1358231

Amount of Each Receipt this Period
34.00

B. Full Name (Last, First, Middle Initial)
RHONDA J BUBAN

Mailing Address 856 SPRINGHILL CT

City State Zip Code
ELGIN IL 60120

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 ▼ 218.42

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164076

Amount of Each Receipt this Period
14.56

C. Full Name (Last, First, Middle Initial)
RHONDA J BUBAN

Mailing Address 856 SPRINGHILL CT

City State Zip Code
ELGIN IL 60120

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 ▼ 232.98

Date of Receipt
08 / 18 / 2006

Transaction ID: A2006-1357984

Amount of Each Receipt this Period
14.56

SUBTOTAL of Receipts This Page (optional) ▶ 63.12

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. STEVEN C BUCHHOLZ		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 412 S. VAIL		Transaction ID: A2006-1164092	
City ARL HEIGHTS	State IL	Zip Code 60005	Amount of Each Receipt this Period 29.92
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.92		

Full Name (Last, First, Middle Initial) B. STEVEN C BUCHHOLZ		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 412 S. VAIL		Transaction ID: A2006-1358000	
City ARL HEIGHTS	State IL	Zip Code 60005	Amount of Each Receipt this Period 29.92
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 498.84		

Full Name (Last, First, Middle Initial) C. NANCY M BUFALINO		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 250 E. PEARSON #1701		Transaction ID: A2006-1164148	
City CHICAGO	State IL	Zip Code 60611	Amount of Each Receipt this Period 22.50
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Finance and Planning		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 354.61		

SUBTOTAL of Receipts This Page (optional) ▶	82.34
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. NANCY M BUFALINO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 250 E. PEARSON #1701		Transaction ID: A2006-1358056	
City State Zip Code CHICAGO IL 60611	Amount of Each Receipt this Period 22.50		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Finance and Planning		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 377.11		

Full Name (Last, First, Middle Initial) B. DAVID N BUGGS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 12234 85TH AVE		Transaction ID: A2006-1164249	
City State Zip Code PLEASANT PR WI 53158	Amount of Each Receipt this Period 31.82		
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 ▼ 509.12		

Full Name (Last, First, Middle Initial) C. DAVID N BUGGS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 12234 85TH AVE		Transaction ID: A2006-1358164	
City State Zip Code PLEASANT PR WI 53158	Amount of Each Receipt this Period 31.82		
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 ▼ 540.94		

SUBTOTAL of Receipts This Page (optional) ▶	86.14
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 314
	<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)
KAREN E BURCKHARDT

Mailing Address 730 E. HAWTHORNE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation AVP-Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 624.17

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164247

Amount of Each Receipt this Period
39.68

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

Mailing Address 730 E. HAWTHORNE

City State Zip Code
ARLINGTON HTS IL 60004

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

Name of Employer Allstate Insurance Company Occupation AVP-Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 663.85

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358162

Amount of Each Receipt this Period
39.68

C. Full Name (Last, First, Middle Initial)
TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City State Zip Code
LAKE VILLA IL 60046

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 ▼ 210.56

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163973

Amount of Each Receipt this Period
13.36

SUBTOTAL of Receipts This Page (optional)	▶	92.72
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. TYRONE A BURNO		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 868 CHARLTON ROAD		Transaction ID: A2006-1357879
City LAKE VILLA	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.36
Name of Employer Allstate Insurance Company	Occupation Human Resource Senior Man	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.92	

Full Name (Last, First, Middle Initial) B. GREGORY C BURNS		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 2000 N. BROADMOOR LANE		Transaction ID: A2006-1163966
City VERNON HILLS	State IL	Zip Code 60061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.50
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.10	

Full Name (Last, First, Middle Initial) C. GREGORY C BURNS		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 2000 N. BROADMOOR LANE		Transaction ID: A2006-1357871
City VERNON HILLS	State IL	Zip Code 60061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.50
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.60	

SUBTOTAL of Receipts This Page (optional)	▶	46.36
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 314
	<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)
PEGGY BURROWS

Mailing Address 2628 HALSEY DRIVE

City State Zip Code
FLOWER MOUND TX 75028

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 451.13

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164279

Amount of Each Receipt this Period
28.43

B. Full Name (Last, First, Middle Initial)
PEGGY BURROWS

Mailing Address 2628 HALSEY DRIVE

City State Zip Code
FLOWER MOUND TX 75028

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 479.56

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358196

Amount of Each Receipt this Period
28.43

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

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

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

Name of Employer Allstate Insurance Company Occupation AVP & Tax Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1319.11

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163903

Amount of Each Receipt this Period
83.91

SUBTOTAL of Receipts This Page (optional)	▶	140.77
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CECILE A BUTLER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 9309 ELIZABETH LANE		Transaction ID: A2006-1357806	
City State Zip Code SPRING GROVE IL 60081	Amount of Each Receipt this Period 83.91		
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 ▼ 1403.02		

Full Name (Last, First, Middle Initial) B. D C BUTLER III		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 15430 WHITE COLUMNS DRIVE		Transaction ID: A2006-1164018	
City State Zip Code ALPHARETTA GA 30004	Amount of Each Receipt this Period 50.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 786.95		

Full Name (Last, First, Middle Initial) C. D C BUTLER III		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 15430 WHITE COLUMNS DRIVE		Transaction ID: A2006-1357924	
City State Zip Code ALPHARETTA GA 30004	Amount of Each Receipt this Period 50.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 837.18		

SUBTOTAL of Receipts This Page (optional) ▶	184.37
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.03

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164243

Amount of Each Receipt this Period
17.91

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 Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 303.94

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358158

Amount of Each Receipt this Period
17.91

C. Full Name (Last, First, Middle Initial)
RICHARD S CAIRNS

Mailing Address 2791 NE 9TH COURT

City State Zip Code
POMPANO BEACH FL 33062

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

Name of Employer Allstate Insurance Company Occupation Distribution Support Lead

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 236.03

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164026

Amount of Each Receipt this Period
14.93

SUBTOTAL of Receipts This Page (optional)	▶	50.75
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 314
	<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 S CAIRNS

Mailing Address 2791 NE 9TH COURT

City State Zip Code
POMPANO BEACH FL 33062

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

Name of Employer Allstate Insurance Company Occupation Distribution Support Lead

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.96

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357933

Amount of Each Receipt this Period
14.93

B. Full Name (Last, First, Middle Initial)
DEBORAH K CAMPBELL

Mailing Address 21863 NORTH TALL OAKS COURT

City State Zip Code
KILDEER IL 60047

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 ▼ 912.85

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164230

Amount of Each Receipt this Period
57.81

C. Full Name (Last, First, Middle Initial)
DEBORAH K CAMPBELL

Mailing Address 21863 NORTH TALL OAKS COURT

City State Zip Code
KILDEER IL 60047

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 ▼ 970.66

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358141

Amount of Each Receipt this Period
57.81

SUBTOTAL of Receipts This Page (optional)	▶	130.55
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN M CANTWELL		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 335 DEVON COURT		Transaction ID: A2006-1163983
City GRAYSLAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.30
Name of Employer Allstate Insurance Company	Occupation Agency Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.80	

Full Name (Last, First, Middle Initial) B. JOHN M CANTWELL		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 335 DEVON COURT		Transaction ID: A2006-1357889
City GRAYSLAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.30
Name of Employer Allstate Insurance Company	Occupation Agency Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.10	

Full Name (Last, First, Middle Initial) C. KIMBERLY CARMICHAEL		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 713 TORY LANE		Transaction ID: A2006-1164027
City PHOENIXVILLE	State PA	Zip Code 19460
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.91
Name of Employer Allstate Insurance Company	Occupation Agency Consulting Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.76	

SUBTOTAL of Receipts This Page (optional)	▶	43.51
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 314
	(check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KIMBERLY CARMICHAEL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 713 TORY LANE		Transaction ID: A2006-1357934	
City State Zip Code PHOENIXVILLE PA 19460	Amount of Each Receipt this Period 14.91		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Agency Consulting Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.67		

Full Name (Last, First, Middle Initial) B. EARL W CHANCE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 6974 WINTER RIDGE PLACE		Transaction ID: A2006-1164275	
City State Zip Code CASTLE ROCK CO 80108	Amount of Each Receipt this Period 14.63		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Product Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.63		

Full Name (Last, First, Middle Initial) C. EARL W CHANCE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 6974 WINTER RIDGE PLACE		Transaction ID: A2006-1358191	
City State Zip Code CASTLE ROCK CO 80108	Amount of Each Receipt this Period 14.63		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Product Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.26		

SUBTOTAL of Receipts This Page (optional) ▶	44.17
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. IRIS M CHESTER		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 643 ST GEORGE CT		Transaction ID: A2006-1164257
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.32
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 319.66	

Full Name (Last, First, Middle Initial) B. IRIS M CHESTER		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 643 ST GEORGE CT		Transaction ID: A2006-1358172
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.32
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 339.98	

Full Name (Last, First, Middle Initial) C. VIRGINIA O CHIAPPETTA		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 165 ARLINGTON AVE		Transaction ID: A2006-1164198
City ELMHURST	State IL	Zip Code 60126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.11
Name of Employer Allstate Insurance Company	Occupation Communication Senior Mana	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.16	

SUBTOTAL of Receipts This Page (optional)	55.75
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 314
	(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

Full Name (Last, First, Middle Initial) A. VIRGINIA O CHIAPPETTA		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 165 ARLINGTON AVE		Transaction ID: A2006-1358107	
City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 15.11		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Senior Mana		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.27		

Full Name (Last, First, Middle Initial) B. SCOTT M CHRISTENSEN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 20713 LEXINGTON LANE		Transaction ID: A2006-1164179	
City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 35.47		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.37		

Full Name (Last, First, Middle Initial) C. SCOTT M CHRISTENSEN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 20713 LEXINGTON LANE		Transaction ID: A2006-1358088	
City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 35.47		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 597.84		

SUBTOTAL of Receipts This Page (optional) ▶	86.05
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 314
	<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 A CLARK

Mailing Address 26115 N 104TH WAY

City State Zip Code
SCOTTSDALE AZ 85255

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 ▼ 657.36

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163940

Amount of Each Receipt this Period
41.96

B. 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 Regional Marketing Manage

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.90

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164206

Amount of Each Receipt this Period
17.00

C. Full Name (Last, First, Middle Initial)
BRIAN L CLARK

Mailing Address 504 FLORENCE DRIVE

City State Zip Code
MADISON MS 39110

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

Name of Employer Allstate Insurance Company Occupation Staff Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 227.94

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164265

Amount of Each Receipt this Period
14.44

SUBTOTAL of Receipts This Page (optional)	▶	73.40
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL A CLARK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 26115 N 104TH WAY		Transaction ID: A2006-1357842	
City State Zip Code SCOTTSDALE AZ 85255	Amount of Each Receipt this Period 41.96		
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 ▼ 699.32		

Full Name (Last, First, Middle Initial) B. EDWARD T CLARK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 2907 GLENARYE DR		Transaction ID: A2006-1358116	
City State Zip Code LINDENHURST IL 60046	Amount of Each Receipt this Period 17.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Regional Marketing Manage		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.90		

Full Name (Last, First, Middle Initial) C. BRIAN L CLARK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 504 FLORENCE DRIVE		Transaction ID: A2006-1358180	
City State Zip Code MADISON MS 39110	Amount of Each Receipt this Period 14.44		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Staff Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.38		

SUBTOTAL of Receipts This Page (optional) ▶	73.40
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 314
	(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)
MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS IL 60558

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

Name of Employer Allstate Insurance Company Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 506.03

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164063

Amount of Each Receipt this Period
32.13

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

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS IL 60558

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

Name of Employer Allstate Insurance Company Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 538.16

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357970

Amount of Each Receipt this Period
32.13

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 Allstate Insurance Company Occupation Senior Field Corporate Re

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.26

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164205

Amount of Each Receipt this Period
26.71

SUBTOTAL of Receipts This Page (optional)	▶	90.97
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 314
	<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)
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 Allstate Insurance Company Occupation Senior Field Corporate Re

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 447.97

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358115

Amount of Each Receipt this Period
26.71

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

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.87

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164167

Amount of Each Receipt this Period
30.12

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

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.99

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358076

Amount of Each Receipt this Period
30.12

SUBTOTAL of Receipts This Page (optional)	86.95
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM C COLE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 6796 LIVINGSTON DR.		Transaction ID: A2006-1164343	
City State Zip Code HUNTINGTON BCH CA 92648		Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Managing Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 261.60	

Full Name (Last, First, Middle Initial) B. WILLIAM C COLE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 6796 LIVINGSTON DR.		Transaction ID: A2006-1358261	
City State Zip Code HUNTINGTON BCH CA 92648		Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Managing Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 277.95	

Full Name (Last, First, Middle Initial) C. EDWARD T COLLINS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 809 DUNHILL COURT		Transaction ID: A2006-1164114	
City State Zip Code GURNEE IL 60031		Amount of Each Receipt this Period 39.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 688.01	

SUBTOTAL of Receipts This Page (optional) ▶	72.47
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 / 314
	(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

Full Name (Last, First, Middle Initial) A. EDWARD T COLLINS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 809 DUNHILL COURT		Transaction ID: A2006-1358023	
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 39.77		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 727.78		

Full Name (Last, First, Middle Initial) B. LARRY K CONLEE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 4516 LINSCOTT AVE		Transaction ID: A2006-1164154	
City State Zip Code DOWNERS GROVE IL 60515	Amount of Each Receipt this Period 15.51		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Actuary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.91		

Full Name (Last, First, Middle Initial) C. LARRY K CONLEE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 4516 LINSCOTT AVE		Transaction ID: A2006-1358062	
City State Zip Code DOWNERS GROVE IL 60515	Amount of Each Receipt this Period 15.51		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Actuary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.42		

SUBTOTAL of Receipts This Page (optional) ▶	70.79
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL P COOGAN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1609 SYRACUSE LN.		Transaction ID: A2006-1164170	
City State Zip Code SCHAUMBURG IL 60193	Amount of Each Receipt this Period 28.11		
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 ▼ 445.31		

Full Name (Last, First, Middle Initial) B. MICHAEL P COOGAN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1609 SYRACUSE LN.		Transaction ID: A2006-1358079	
City State Zip Code SCHAUMBURG IL 60193	Amount of Each Receipt this Period 28.11		
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 ▼ 473.42		

Full Name (Last, First, Middle Initial) C. RONALD L CORBIN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 14 Portrush Place		Transaction ID: A2006-1164273	
City State Zip Code BRENTWOOD TN 37027	Amount of Each Receipt this Period 64.28		
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 ▼ 1011.19		

SUBTOTAL of Receipts This Page (optional) ▶	120.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 314
	<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)
RONALD L CORBIN

Mailing Address 14 Portrush Place

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1075.47

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358189

Amount of Each Receipt this Period
64.28

B. Full Name (Last, First, Middle Initial)
THOMAS J CREAGH

Mailing Address 4008 NORTH HIGHLAND AVENUE

City State Zip Code
ARLINGTON HTS IL 60004

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 ▼ 314.09

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163942

Amount of Each Receipt this Period
19.69

C. Full Name (Last, First, Middle Initial)
THOMAS J CREAGH

Mailing Address 4008 NORTH HIGHLAND AVENUE

City State Zip Code
ARLINGTON HTS IL 60004

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 ▼ 333.78

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357844

Amount of Each Receipt this Period
19.69

SUBTOTAL of Receipts This Page (optional)	▶	103.66
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM G CRIMMINS		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 218 S KASPAR		Transaction ID: A2006-1164073
City ARLINGTON HGTS.	State IL	Zip Code 60005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.74
Name of Employer Allstate Insurance Company	Occupation Vice President & Deputy G	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1059.62	

Full Name (Last, First, Middle Initial) B. WILLIAM G CRIMMINS		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 218 S KASPAR		Transaction ID: A2006-1357981
City ARLINGTON HGTS.	State IL	Zip Code 60005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.74
Name of Employer Allstate Insurance Company	Occupation Vice President & Deputy G	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1127.36	

Full Name (Last, First, Middle Initial) C. FREDERICK F CRIPE		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 277 N. BILTMORE DRIVE		Transaction ID: A2006-1164067
City N. BARRINGTON	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.15
Name of Employer Allstate Insurance Company	Occupation GVP-Product Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1194.18	

SUBTOTAL of Receipts This Page (optional)	211.63
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. FREDERICK F CRIPE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 277 N. BILTMORE DRIVE		Transaction ID: A2006-1357974
City State Zip Code N. BARRINGTON IL 60010	Amount of Each Receipt this Period 76.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation GVP-Product Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1270.33	

Full Name (Last, First, Middle Initial) B. RICHARD C CRIST JR		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 14 CARDINAL DRIVE		Transaction ID: A2006-1163974
City State Zip Code PRINCETON JUNCT NJ 08550	Amount of Each Receipt this Period 65.96	
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 ▼ 1052.37	

Full Name (Last, First, Middle Initial) C. RICHARD C CRIST JR		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 14 CARDINAL DRIVE		Transaction ID: A2006-1357880
City State Zip Code PRINCETON JUNCT NJ 08550	Amount of Each Receipt this Period 65.96	
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 ▼ 1118.33	

SUBTOTAL of Receipts This Page (optional) ▶	208.07
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 62 / 314
	(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

Full Name (Last, First, Middle Initial) A. JOAN M CROCKETT		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 27 RIVER BEND CT		Transaction ID: A2006-1164043	
City LAKE BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 113.08
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1736.55		

Full Name (Last, First, Middle Initial) B. JOAN M CROCKETT		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 27 RIVER BEND CT		Transaction ID: A2006-1357951	
City LAKE BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 113.08
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1849.63		

Full Name (Last, First, Middle Initial) C. WILLIAM DALY		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 22425 N LINDEN DR.		Transaction ID: A2006-1163958	
City BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 35.74
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 566.64		

SUBTOTAL of Receipts This Page (optional)	261.90
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM DALY		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 22425 N LINDEN DR.		Transaction ID: A2006-1357862	
City BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 35.74
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 602.38		

Full Name (Last, First, Middle Initial) B. ROBERT W DANIELS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1020 Pleasant Street		Transaction ID: A2006-1164005	
City Oak Park	State IL	Zip Code 60302	Amount of Each Receipt this Period 27.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 439.43		

Full Name (Last, First, Middle Initial) C. ROBERT W DANIELS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1020 Pleasant Street		Transaction ID: A2006-1357911	
City Oak Park	State IL	Zip Code 60302	Amount of Each Receipt this Period 27.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 467.31		

SUBTOTAL of Receipts This Page (optional) ▶	91.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SAM DE FRANK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 5 COURT OF HIDDEN WELLS		Transaction ID: A2006-1164122
City NORTHBROOK State IL Zip Code 60062	Amount of Each Receipt this Period 32.02	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation AVP & Tax Counsel	Aggregate Year-to-Date ▼ 506.86	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. SAM DE FRANK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 5 COURT OF HIDDEN WELLS		Transaction ID: A2006-1358031
City NORTHBROOK State IL Zip Code 60062	Amount of Each Receipt this Period 32.02	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation AVP & Tax Counsel	Aggregate Year-to-Date ▼ 538.88	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. PETER D DEBRECENY		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1512 NORTH HOYNE AVE		Transaction ID: A2006-1164056
City CHICAGO State IL Zip Code 60622	Amount of Each Receipt this Period 58.62	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation Vice President Corporate	Aggregate Year-to-Date ▼ 926.02	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	122.66
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 314
	<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)
PETER D DEBRECENY

Mailing Address 1512 NORTH HOYNE AVE

City State Zip Code
CHICAGO IL 60622

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

Name of Employer Allstate Insurance Company Occupation Vice President Corporate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 984.64

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357964

Amount of Each Receipt this Period
58.62

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

Mailing Address 6710 BLUE RIDGE LANE

City State Zip Code
LINCOLN NE 68516

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 437.23

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164117

Amount of Each Receipt this Period
27.78

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

Mailing Address 6710 BLUE RIDGE LANE

City State Zip Code
LINCOLN NE 68516

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.01

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358026

Amount of Each Receipt this Period
27.78

SUBTOTAL of Receipts This Page (optional)	▶	114.18
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 314
	<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)
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 ▼ 538.73

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1164047

Amount of Each Receipt this Period
34.08

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 ▼ 572.81

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 8 / 2 0 0 6

Transaction ID: A2006-1357955

Amount of Each Receipt this Period
34.08

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 Specialty Lines

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 779.25

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1164221

Amount of Each Receipt this Period
49.74

SUBTOTAL of Receipts This Page (optional)	▶	117.90
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 / 314
	(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

Full Name (Last, First, Middle Initial) A. JEFFREY F DEIGL		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 453 PRAIRIE		Transaction ID: A2006-1358131
City State Zip Code ELMHURST IL 60126	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 49.74
Name of Employer Allstate Insurance Company	Occupation AVP Specialty Lines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 828.99	

Full Name (Last, First, Middle Initial) B. LORI A DESCH		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 5 TREGONWELL COURT		Transaction ID: A2006-1164036
City State Zip Code ALGONQUIN IL 60102	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 29.31
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.08	

Full Name (Last, First, Middle Initial) C. LORI A DESCH		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 5 TREGONWELL COURT		Transaction ID: A2006-1357944
City State Zip Code ALGONQUIN IL 60102	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 29.31
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 479.39	

SUBTOTAL of Receipts This Page (optional)	108.36
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 / 314
	(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)
KRISTINE DIGIROLAMO

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code
BARRINGTON HILL IL 60102

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 ▼
238.51

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164244

Amount of Each Receipt this Period
15.26

B. Full Name (Last, First, Middle Initial)
KRISTINE DIGIROLAMO

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code
BARRINGTON HILL IL 60102

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 ▼
253.77

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358159

Amount of Each Receipt this Period
15.26

C. Full Name (Last, First, Middle Initial)
LEO DISHEL

Mailing Address 340 E 74TH ST APT 6C

City State Zip Code
NEW YORK NY 10021

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

Name of Employer Allstate Insurance Company Occupation Market Distribution Leade

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.51

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163938

Amount of Each Receipt this Period
19.71

SUBTOTAL of Receipts This Page (optional)	▶	50.23
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LEO DISHEL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 340 E 74TH ST APT 6C		Transaction ID: A2006-1357840	
City NEW YORK	State NY	Zip Code 10021	Amount of Each Receipt this Period 19.71
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.22		

Full Name (Last, First, Middle Initial) B. SARAH R DONAHUE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 4147 RFD		Transaction ID: A2006-1164197	
City LONG GROVE	State IL	Zip Code 60047	Amount of Each Receipt this Period 35.69
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Northbrook/Glenbrook		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 561.45		

Full Name (Last, First, Middle Initial) C. SARAH R DONAHUE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 4147 RFD		Transaction ID: A2006-1358106	
City LONG GROVE	State IL	Zip Code 60047	Amount of Each Receipt this Period 53.54
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Northbrook/Glenbrook		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 614.99		

SUBTOTAL of Receipts This Page (optional) ▶	108.94
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 70 / 314
	(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

Full Name (Last, First, Middle Initial) A. PHILIP J DORN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 12 SAINT JOHN DRIVE		Transaction ID: A2006-1164319
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 19.87	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Investor Relations Direct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.02	

Full Name (Last, First, Middle Initial) B. PHILIP J DORN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 12 SAINT JOHN DRIVE		Transaction ID: A2006-1358237
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 19.87	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Investor Relations Direct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.89	

Full Name (Last, First, Middle Initial) C. DANIEL C DRESSSEL		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 1706 ADLER LANE		Transaction ID: A2006-1163978
City State Zip Code MALVERN PA 19355	Amount of Each Receipt this Period 19.41	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Field Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.81	

SUBTOTAL of Receipts This Page (optional) ▶	59.15
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DANIEL C DRESSEL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1706 ADLER LANE		Transaction ID: A2006-1357884
City State Zip Code MALVERN PA 19355	Amount of Each Receipt this Period 19.41	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Field Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.22	

Full Name (Last, First, Middle Initial) B. JAMES M DUDAS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 109 LORRAINE DRIVE		Transaction ID: A2006-1164045
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 17.49	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.64	

Full Name (Last, First, Middle Initial) C. JAMES M DUDAS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 109 LORRAINE DRIVE		Transaction ID: A2006-1357953
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 17.49	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Communication Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.13	

SUBTOTAL of Receipts This Page (optional) ▶	54.39
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 / 314
	(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

Full Name (Last, First, Middle Initial) A. TIMOTHY R DUGAN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 3220 SANDY LANE		Transaction ID: A2006-1164308
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 28.40	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 454.40	

Full Name (Last, First, Middle Initial) B. TIMOTHY R DUGAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 3220 SANDY LANE		Transaction ID: A2006-1358225
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 28.40	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 482.80	

Full Name (Last, First, Middle Initial) C. WILLIAM F DULIN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 1301 NORMANDY CT		Transaction ID: A2006-1164020
City State Zip Code SOUTHLAKE TX 76092	Amount of Each Receipt this Period 14.70	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Education and Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.10	

SUBTOTAL of Receipts This Page (optional) ▶	71.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM F DULIN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1301 NORMANDY CT		Transaction ID: A2006-1357926	
City State Zip Code SOUTHLAKE TX 76092	Amount of Each Receipt this Period 14.70		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Education and Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.80		

Full Name (Last, First, Middle Initial) B. LAURA DUNNE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1810 BALMORAL AVE		Transaction ID: A2006-1164182	
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 20.93		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Strategy Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.93		

Full Name (Last, First, Middle Initial) C. LAURA DUNNE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1810 BALMORAL AVE		Transaction ID: A2006-1358091	
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 20.93		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Strategy Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.86		

SUBTOTAL of Receipts This Page (optional) ▶	56.56
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 74 / 314
	(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)
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
AF Operations Dept Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
421.58

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164203

Amount of Each Receipt this Period
26.63

B. 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
AF Operations Dept Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
448.21

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358113

Amount of Each Receipt this Period
26.63

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

Mailing Address 1250 So Indiana - Unit 1309

City State Zip Code
Chicago IL 60605

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

Name of Employer
Allstate Insurance Company

Occupation
AVP P-CCSO Strategy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
652.50

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163960

Amount of Each Receipt this Period
41.35

SUBTOTAL of Receipts This Page (optional)	▶	94.61
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 / 314
	(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

Full Name (Last, First, Middle Initial) A. JOHN EDELEN		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 1250 So Indiana - Unit 1309		Transaction ID: A2006-1357864
City Chicago	State IL	Zip Code 60605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.35
Name of Employer Allstate Insurance Company	Occupation AVP P-CCSO Strategy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 693.85	

Full Name (Last, First, Middle Initial) B. NINA B EIDELL		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 25 E. Superior # 11B		Transaction ID: A2006-1163909
City CHICAGO	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.06
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 ▼ 960.51	

Full Name (Last, First, Middle Initial) C. NINA B EIDELL		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 25 E. Superior # 11B		Transaction ID: A2006-1357812
City CHICAGO	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.06
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 ▼ 1021.57	

SUBTOTAL of Receipts This Page (optional)	▶	163.47
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PHILIP L EMMANUELE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1085 FOREST HILL RD.		Transaction ID: A2006-1163941
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 58.25	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Marketing Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 924.02	

Full Name (Last, First, Middle Initial) B. PHILIP L EMMANUELE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1085 FOREST HILL RD.		Transaction ID: A2006-1357843
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 58.25	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Marketing Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 982.27	

Full Name (Last, First, Middle Initial) C. KATHLEEN N ENRIGHT		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 10323 TRUMBULL AVE		Transaction ID: A2006-1164211
City State Zip Code CHICAGO IL 60655	Amount of Each Receipt this Period 33.61	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 529.71	

SUBTOTAL of Receipts This Page (optional) ▶	150.11
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 / 314
	(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

Full Name (Last, First, Middle Initial) A. KATHLEEN N ENRIGHT		Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2006	
Mailing Address 10323 TRUMBULL AVE		Transaction ID: A2006-1358121	
City State Zip Code CHICAGO IL 60655	Amount of Each Receipt this Period 33.61		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 563.32		

Full Name (Last, First, Middle Initial) B. MICHAEL L ESCOBAR		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006	
Mailing Address 660 BALMORAL LANE		Transaction ID: A2006-1163921	
City State Zip Code INVERNESS IL 60067	Amount of Each Receipt this Period 48.44		
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 ▼ 763.91		

Full Name (Last, First, Middle Initial) C. MICHAEL L ESCOBAR		Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2006	
Mailing Address 660 BALMORAL LANE		Transaction ID: A2006-1357823	
City State Zip Code INVERNESS IL 60067	Amount of Each Receipt this Period 48.44		
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 ▼ 812.35		

SUBTOTAL of Receipts This Page (optional) ▶	130.49
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 314
	<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 B ESPINOZA

Mailing Address 673 HASTINGS ROAD

City State Zip Code
WHEELING IL 60090

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

Name of Employer Allstate Insurance Company Occupation Unclassified Sr Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 471.83

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164137

Amount of Each Receipt this Period
29.83

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

Mailing Address 673 HASTINGS ROAD

City State Zip Code
WHEELING IL 60090

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

Name of Employer Allstate Insurance Company Occupation Unclassified Sr Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.66

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358045

Amount of Each Receipt this Period
29.83

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

Mailing Address 1224 BARCLAY CIRCLE

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 636.67

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163956

Amount of Each Receipt this Period
40.47

SUBTOTAL of Receipts This Page (optional)	▶	100.13
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 79 / 314
	(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

Full Name (Last, First, Middle Initial) A. THOMAS W EVANS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1224 BARCLAY CIRCLE		Transaction ID: A2006-1357859	
City State Zip Code BARRINGTON IL 60010		Amount of Each Receipt this Period 40.47	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Vice President Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 677.14	

Full Name (Last, First, Middle Initial) B. DOROTHY EVEN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1130 KEYSTONE AVENUE		Transaction ID: A2006-1164112	
City State Zip Code RIVER FOREST IL 60305		Amount of Each Receipt this Period 78.81	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1240.73	

Full Name (Last, First, Middle Initial) C. DOROTHY EVEN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1130 KEYSTONE AVENUE		Transaction ID: A2006-1358021	
City State Zip Code RIVER FOREST IL 60305		Amount of Each Receipt this Period 78.81	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1319.54	

SUBTOTAL of Receipts This Page (optional) ▶	198.09
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 314
	<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)
LAURA A FABREGUE

Mailing Address 1000 HAMAN WAY

City State Zip Code
ROSEVILLE CA 95678

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.77

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1163977

Amount of Each Receipt this Period
28.43

B. Full Name (Last, First, Middle Initial)
LAURA A FABREGUE

Mailing Address 1000 HAMAN WAY

City State Zip Code
ROSEVILLE CA 95678

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 424.20

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 8 / 2 0 0 6

Transaction ID: A2006-1357883

Amount of Each Receipt this Period
28.43

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

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.24

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1164256

Amount of Each Receipt this Period
36.39

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KATHRYN L FABYAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 21209 WEST YORKSHIRE DRIVE		Transaction ID: A2006-1358171	
City State Zip Code KILDEER IL 60049	Amount of Each Receipt this Period 36.39		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 611.63		

Full Name (Last, First, Middle Initial) B. GORDON S FALKNOR		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 703 E CHERRY LN		Transaction ID: A2006-1164134	
City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 44.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 696.65		

Full Name (Last, First, Middle Initial) C. GORDON S FALKNOR		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 703 E CHERRY LN		Transaction ID: A2006-1358042	
City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 44.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 741.00		

SUBTOTAL of Receipts This Page (optional) ▶	125.09
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CAROLYN A FILIPOVIC		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 918 JUNIPER ROAD		Transaction ID: A2006-1164233	
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 24.74		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Regional Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.04		

Full Name (Last, First, Middle Initial) B. CAROLYN A FILIPOVIC		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 918 JUNIPER ROAD		Transaction ID: A2006-1358144	
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 24.74		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Regional Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.78		

Full Name (Last, First, Middle Initial) C. STEVEN FINE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 40375 N. SEA EAGLE CT		Transaction ID: A2006-1163963	
City State Zip Code ANTIOCH IL 60002	Amount of Each Receipt this Period 23.91		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.68		

SUBTOTAL of Receipts This Page (optional) ▶	73.39
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 314
	<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)
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 ▼ 389.59

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357868

Amount of Each Receipt this Period
23.91

B. Full Name (Last, First, Middle Initial)
DARYLL D FLETCHER

Mailing Address 22256 W MASHI CT

City State Zip Code
IVANHOE IL 60060

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 ▼ 420.96

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164104

Amount of Each Receipt this Period
26.87

C. Full Name (Last, First, Middle Initial)
DARYLL D FLETCHER

Mailing Address 22256 W MASHI CT

City State Zip Code
IVANHOE IL 60060

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 ▼ 447.83

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358013

Amount of Each Receipt this Period
26.87

SUBTOTAL of Receipts This Page (optional) ▶ **77.65**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 84 / 314
	(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

Full Name (Last, First, Middle Initial) A. BARBARA J FLOWERS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1105 W CAMPBELL ST		Transaction ID: A2006-1164060	
City State Zip Code ARLINGTON HTS IL 60005	Amount of Each Receipt this Period 16.42		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Personal Lines Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.57		

Full Name (Last, First, Middle Initial) B. KELLY F FOGARTY		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 613 REX		Transaction ID: A2006-1164129	
City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 35.65		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Specialty Lines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 563.19		

Full Name (Last, First, Middle Initial) C. KELLY F FOGARTY		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 613 REX		Transaction ID: A2006-1358037	
City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 35.65		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Specialty Lines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 598.84		

SUBTOTAL of Receipts This Page (optional) ▶	87.72
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 / 314
	(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

Full Name (Last, First, Middle Initial) A. ANGELA K FONTANA		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1280 WILD ROSE LANE		Transaction ID: A2006-1164291
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.58
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 ▼ 230.63	

Full Name (Last, First, Middle Initial) B. ANGELA K FONTANA		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1280 WILD ROSE LANE		Transaction ID: A2006-1358208
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.58
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 ▼ 245.21	

Full Name (Last, First, Middle Initial) C. DAWN H FRASE		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 24076 N. SHAGBARK		Transaction ID: A2006-1164196
City LAKE ZURICH	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.89
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.79	

SUBTOTAL of Receipts This Page (optional)	▶	47.05
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DAWN H FRASE		Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2006	
Mailing Address 24076 N. SHAGBARK		Transaction ID: A2006-1358105	
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 17.89		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.68		

Full Name (Last, First, Middle Initial) B. PATRICIA W FRIDLEY		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006	
Mailing Address 945 Shermer Road		Transaction ID: A2006-1164051	
City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 72.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1063.38		

Full Name (Last, First, Middle Initial) C. PATRICIA W FRIDLEY		Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2006	
Mailing Address 945 Shermer Road		Transaction ID: A2006-1357959	
City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 72.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1135.38		

SUBTOTAL of Receipts This Page (optional) ▶	161.89
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 314
	<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)
KARL A FRIEDMAN

Mailing Address 333 DUNLEER DRIVE

City State Zip Code
CARY IL 60013

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 ▼ 217.69

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164150

Amount of Each Receipt this Period
15.68

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

Mailing Address 333 DUNLEER DRIVE

City State Zip Code
CARY IL 60013

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 ▼ 233.37

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358058

Amount of Each Receipt this Period
15.68

C. Full Name (Last, First, Middle Initial)
ERIC M FRISVOLD

Mailing Address 1404 SHETLAND DR

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Allstate Insurance Company Occupation Accounting Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.79

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164288

Amount of Each Receipt this Period
14.24

SUBTOTAL of Receipts This Page (optional)	▶	45.60
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 314
	<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)
ERIC M FRISVOLD

Mailing Address 1404 SHETLAND DR

City State Zip Code
MUNDELEIN IL 60060

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

Name of Employer Allstate Insurance Company Occupation Accounting Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.03

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358205

Amount of Each Receipt this Period
14.24

B. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER

Mailing Address 350 EDGE FIELD LANE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 629.12

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164050

Amount of Each Receipt this Period
39.77

C. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER

Mailing Address 350 EDGE FIELD LANE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 668.89

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357958

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional)	▶	93.78
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. VINCENT A FUSCO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 6 SUGAR MAPLE COURT		Transaction ID: A2006-1163919
City State Zip Code DIX HILLS NY 11746	Amount of Each Receipt this Period 21.38	
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 ▼ 360.14	

Full Name (Last, First, Middle Initial) B. ANGELA FUSCO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 22255 MASHIE CT		Transaction ID: A2006-1163976
City State Zip Code IVANHOE IL 60060	Amount of Each Receipt this Period 25.99	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 393.08	

Full Name (Last, First, Middle Initial) C. VINCENT A FUSCO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 6 SUGAR MAPLE COURT		Transaction ID: A2006-1357821
City State Zip Code DIX HILLS NY 11746	Amount of Each Receipt this Period 21.38	
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 ▼ 381.52	

SUBTOTAL of Receipts This Page (optional) ▶	68.75
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 / 314
	(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

Full Name (Last, First, Middle Initial) A. ANGELA FUSCO		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 22255 MASHIE CT		Transaction ID: A2006-1357882
City IVANHOE	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.99
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 419.07	

Full Name (Last, First, Middle Initial) B. DOUGLAS F GAER		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 5610 SOUTH 88th STREET		Transaction ID: A2006-1164294
City LINCOLN	State NE	Zip Code 68526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.30
Name of Employer Allstate Insurance Company	Occupation AVP Nebraska Service Cent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 356.80	

Full Name (Last, First, Middle Initial) C. DOUGLAS F GAER		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 5610 SOUTH 88th STREET		Transaction ID: A2006-1358211
City LINCOLN	State NE	Zip Code 68526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.30
Name of Employer Allstate Insurance Company	Occupation AVP Nebraska Service Cent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 379.10	

SUBTOTAL of Receipts This Page (optional)	▶	70.59
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 91 / 314
	(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

Full Name (Last, First, Middle Initial) A. PATRICK C GALLERY		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 2321 WEST STEEPLECHASE		Transaction ID: A2006-1163981
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 56.49	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President & Assistan	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 887.67	

Full Name (Last, First, Middle Initial) B. PATRICK C GALLERY		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 2321 WEST STEEPLECHASE		Transaction ID: A2006-1357887
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 56.49	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President & Assistan	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 944.16	

Full Name (Last, First, Middle Initial) C. KAREN C GARDNER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1434 BAFFIN ROAD		Transaction ID: A2006-1164292
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 65.75	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1032.12	

SUBTOTAL of Receipts This Page (optional) ▶	178.73
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KAREN C GARDNER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1434 BAFFIN ROAD		Transaction ID: A2006-1358209	
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 65.75		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Tax		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1097.87		

Full Name (Last, First, Middle Initial) B. JOSEPH E GARNETT		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 507 OLD WALNUT CIRCLE		Transaction ID: A2006-1163925	
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 18.42		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Bank Cash Management Dire		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.62		

Full Name (Last, First, Middle Initial) C. JOSEPH E GARNETT		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 507 OLD WALNUT CIRCLE		Transaction ID: A2006-1357827	
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 18.42		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Bank Cash Management Dire		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.04		

SUBTOTAL of Receipts This Page (optional) ▶	102.59
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 314
	<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)
LYNN A GEHANT

Mailing Address 23W650 WOODWORTH PLACE

City ROSELLE State IL Zip Code 60172

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 556.15

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1164138

Amount of Each Receipt this Period
 34.85

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

Mailing Address 23W650 WOODWORTH PLACE

City ROSELLE State IL Zip Code 60172

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 591.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 8 / 2 0 0 6

Transaction ID: A2006-1358046

Amount of Each Receipt this Period
 34.85

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

Mailing Address 1846 N. HALSTED ST. #2

City CHICAGO State IL Zip Code 60614

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

Name of Employer Allstate Insurance Company Occupation Finance & Planning Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.46

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1164161

Amount of Each Receipt this Period
 14.41

SUBTOTAL of Receipts This Page (optional) ► 84.11

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 94 / 314
	(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

Full Name (Last, First, Middle Initial) A. NICK GEORGAKOPOULOS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1846 N. HALSTED ST. #2		Transaction ID: A2006-1358070
City State Zip Code CHICAGO IL 60614	Amount of Each Receipt this Period 14.41	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Finance & Planning Senior	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.87	

Full Name (Last, First, Middle Initial) B. BONNIE S GILL		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 1570 EDGEFIELD LANE		Transaction ID: A2006-1164293
City State Zip Code HOFFMAN ESTATES IL 60195	Amount of Each Receipt this Period 29.45	
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 <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 443.29	

Full Name (Last, First, Middle Initial) C. BONNIE S GILL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1570 EDGEFIELD LANE		Transaction ID: A2006-1358210
City State Zip Code HOFFMAN ESTATES IL 60195	Amount of Each Receipt this Period 29.45	
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 <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 472.74	

SUBTOTAL of Receipts This Page (optional) ▶	73.31
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOAN GILMORE		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 656 S BUCKINGHAM CT		Transaction ID: A2006-1163922
City State Zip Code LAKE FOREST IL 60045	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 39.77
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 687.89	

Full Name (Last, First, Middle Initial) B. JOAN GILMORE		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 656 S BUCKINGHAM CT		Transaction ID: A2006-1357824
City State Zip Code LAKE FOREST IL 60045	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 39.77
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 727.66	

Full Name (Last, First, Middle Initial) C. DEBORAH C GIVENS		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 4370 MILNER ROAD WEST		Transaction ID: A2006-1164263
City State Zip Code BIRMINGHAM AL 35242	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 41.50
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 ▼ 537.88	

SUBTOTAL of Receipts This Page (optional)	▶	121.04
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DEBORAH C GIVENS		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 4370 MILNER ROAD WEST		Transaction ID: A2006-1358178
City	State	Zip Code
BIRMINGHAM	AL	35242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.50
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 ▼ 579.38	

Full Name (Last, First, Middle Initial) B. MARLA F GLABE		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 83 CARIBOU CROSSING		Transaction ID: A2006-1164176
City	State	Zip Code
NORTHBROOK	IL	60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 68.34
Name of Employer Allstate Insurance Company	Occupation Vice President Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1077.41	

Full Name (Last, First, Middle Initial) C. MARLA F GLABE		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 83 CARIBOU CROSSING		Transaction ID: A2006-1358085
City	State	Zip Code
NORTHBROOK	IL	60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 68.34
Name of Employer Allstate Insurance Company	Occupation Vice President Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1145.75	

SUBTOTAL of Receipts This Page (optional)	178.18
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT J GLOD		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1016 N. DERBYSHIRE		Transaction ID: A2006-1164111	
City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 18.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.05		

Full Name (Last, First, Middle Initial) B. ROBERT J GLOD		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1016 N. DERBYSHIRE		Transaction ID: A2006-1358020	
City State Zip Code ARLINGTON HTS IL 60004	Amount of Each Receipt this Period 18.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.40		

Full Name (Last, First, Middle Initial) C. WILLIAM T GOFF		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 124 FLEETS COVE ROAD		Transaction ID: A2006-1163923	
City State Zip Code HUNTINGTON NY 11743	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Product Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 278.59		

SUBTOTAL of Receipts This Page (optional) ▶	53.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM T GOFF		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 124 FLEETS COVE ROAD		Transaction ID: A2006-1357825
City HUNTINGTON	State NY	Zip Code 11743
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Field Product Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.94	

Full Name (Last, First, Middle Initial) B. BARBARA H GOHR		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1601 OLD BARN CIRCLE		Transaction ID: A2006-1164034
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.98
Name of Employer Allstate Insurance Company	Occupation AVP Administrative Operat	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 412.11	

Full Name (Last, First, Middle Initial) C. BARBARA H GOHR		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1601 OLD BARN CIRCLE		Transaction ID: A2006-1357942
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.98
Name of Employer Allstate Insurance Company	Occupation AVP Administrative Operat	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.09	

SUBTOTAL of Receipts This Page (optional)	68.31
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 99 / 314
	(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

Full Name (Last, First, Middle Initial) A. BRUCE R GOLDBERG		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 10 MULBERRY LN		Transaction ID: A2006-1164096	
City HAWTHORN WOODS	State IL	Zip Code 60047	Amount of Each Receipt this Period 19.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.91		

Full Name (Last, First, Middle Initial) B. BRUCE R GOLDBERG		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 10 MULBERRY LN		Transaction ID: A2006-1358004	
City HAWTHORN WOODS	State IL	Zip Code 60047	Amount of Each Receipt this Period 19.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.79		

Full Name (Last, First, Middle Initial) C. ANN A GOULD		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 4071 NEWPORT LANE		Transaction ID: A2006-1164350	
City ARLINGTON HTS	State IL	Zip Code 60004	Amount of Each Receipt this Period 30.47
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Associate Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 481.22		

SUBTOTAL of Receipts This Page (optional) ▶	70.23
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANN A GOULD		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 4071 NEWPORT LANE		Transaction ID: A2006-1358268
City ARLINGTON HTS	State IL	Zip Code 60004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.47
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 511.69	

Full Name (Last, First, Middle Initial) B. KEVIN P GOW		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 4 HAMPTON LANE		Transaction ID: A2006-1163905
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.35
Name of Employer Allstate Insurance Company	Occupation VP AGENCY & CUSTOMER SUPP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.63	

Full Name (Last, First, Middle Initial) C. KEVIN P GOW		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 4 HAMPTON LANE		Transaction ID: A2006-1357808
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.35
Name of Employer Allstate Insurance Company	Occupation VP AGENCY & CUSTOMER SUPP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.98	

SUBTOTAL of Receipts This Page (optional)	81.17
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 101 / 314
	(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

Full Name (Last, First, Middle Initial) A. GEORGE F GRAWE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 18799 GUNN HIGHWAY		Transaction ID: A2006-1164031
City State Zip Code ODESSA FL 33556	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.68	

Full Name (Last, First, Middle Initial) B. GEORGE F GRAWE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 18799 GUNN HIGHWAY		Transaction ID: A2006-1357939
City State Zip Code ODESSA FL 33556	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 358.56	

Full Name (Last, First, Middle Initial) C. PAMELA P GRAY		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 50 E. BELLEVUE PL. #2402		Transaction ID: A2006-1164269
City State Zip Code CHICAGO IL 60611	Amount of Each Receipt this Period 24.24	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Data Center Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.34	

SUBTOTAL of Receipts This Page (optional) ▶	64.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAMELA P GRAY		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 50 E. BELLEVUE PL. #2402		Transaction ID: A2006-1358184
City CHICAGO	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.24
Name of Employer Allstate Insurance Company	Occupation Data Center Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 408.58	

Full Name (Last, First, Middle Initial) B. JUDITH P GREFFIN		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 948 NORTH EUCLID AVENUE		Transaction ID: A2006-1164055
City OAK PARK	State IL	Zip Code 60302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.96
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 596.09	

Full Name (Last, First, Middle Initial) C. JUDITH P GREFFIN		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 948 NORTH EUCLID AVENUE		Transaction ID: A2006-1357963
City OAK PARK	State IL	Zip Code 60302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.96
Name of Employer Allstate Insurance Company	Occupation Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 634.05	

SUBTOTAL of Receipts This Page (optional)	100.16
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARK A GRELLA		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1210 HADLEIGH DRIVE		Transaction ID: A2006-1163952
City WEST CHESTER	State PA	Zip Code 19380
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.28
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 737.26	

Full Name (Last, First, Middle Initial) B. MARK A GRELLA		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1210 HADLEIGH DRIVE		Transaction ID: A2006-1357854
City WEST CHESTER	State PA	Zip Code 19380
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.28
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 783.54	

Full Name (Last, First, Middle Initial) C. MARYLIN H GROOM		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 170 ASPINWALL STREET		Transaction ID: A2006-1163943
City WESTBURY	State NY	Zip Code 11590
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.90	

SUBTOTAL of Receipts This Page (optional)	▶	108.91
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARYLIN H GROOM		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 170 ASPINWALL STREET		Transaction ID: A2006-1357845
City WESTBURY State NY Zip Code 11590	Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.25	

Full Name (Last, First, Middle Initial) B. GREGORY J GUIDOS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 804 QUEENS HARBOR BLVD		Transaction ID: A2006-1164232
City JACKSONVILLE State FL Zip Code 32225	Amount of Each Receipt this Period 21.04	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Finance AFW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.31	

Full Name (Last, First, Middle Initial) C. GREGORY J GUIDOS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 804 QUEENS HARBOR BLVD		Transaction ID: A2006-1358143
City JACKSONVILLE State FL Zip Code 32225	Amount of Each Receipt this Period 21.04	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Finance AFW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.35	

SUBTOTAL of Receipts This Page (optional) ▶	58.43
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 / 314
	<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)
JOHN F HAAS

Mailing Address 6509 E. BETTY ELYSE LANE

City State Zip Code
SCOTTSDALE AZ 85254

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 ▼ 285.15

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164323

Amount of Each Receipt this Period
18.00

B. Full Name (Last, First, Middle Initial)
JOHN F HAAS

Mailing Address 6509 E. BETTY ELYSE LANE

City State Zip Code
SCOTTSDALE AZ 85254

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 ▼ 303.15

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358241

Amount of Each Receipt this Period
18.00

C. Full Name (Last, First, Middle Initial)
KIRK HAGGARD

Mailing Address 6608 OCASO DRIVE

City State Zip Code
CASTLE ROCK CO 80108

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 ▼ 412.24

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164346

Amount of Each Receipt this Period
26.04

SUBTOTAL of Receipts This Page (optional)	▶	62.04
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KIRK HAGGARD		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 6608 OCASO DRIVE		Transaction ID: A2006-1358264	
City CASTLE ROCK	State CO	Zip Code 80108	Amount of Each Receipt this Period 26.04
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.28		

Full Name (Last, First, Middle Initial) B. JAMES W HAIDU		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 3 South Wynstone		Transaction ID: A2006-1164186	
City N. BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 50.61
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Ivantage AVP Specialty Li		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 797.65		

Full Name (Last, First, Middle Initial) C. JAMES W HAIDU		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 3 South Wynstone		Transaction ID: A2006-1358095	
City N. BARRINGTON	State IL	Zip Code 60010	Amount of Each Receipt this Period 50.61
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Ivantage AVP Specialty Li		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 848.26		

SUBTOTAL of Receipts This Page (optional) ▶	127.26
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT F HAIR		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 17 NORTH TRAIL		Transaction ID: A2006-1164351
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 24.96	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 396.31	

Full Name (Last, First, Middle Initial) B. ROBERT F HAIR		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 17 NORTH TRAIL		Transaction ID: A2006-1358269
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 24.96	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 421.27	

Full Name (Last, First, Middle Initial) C. DANNY L HALE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 1071 OLMSTED DRIVE		Transaction ID: A2006-1164255
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 135.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation SVP Chf Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2131.87	

SUBTOTAL of Receipts This Page (optional) ▶	185.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 314
	<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)
DANNY L HALE

Mailing Address 1071 OLMSTED DRIVE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation SVP Chf Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2267.33

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358170

Amount of Each Receipt this Period
135.46

B. Full Name (Last, First, Middle Initial)
ROBERT HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation Human Resource Senior Man

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.04

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164210

Amount of Each Receipt this Period
17.19

C. Full Name (Last, First, Middle Initial)
ROBERT HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation Human Resource Senior Man

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.23

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358120

Amount of Each Receipt this Period
17.19

SUBTOTAL of Receipts This Page (optional) ► 169.84

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 109 / 314
	(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

Full Name (Last, First, Middle Initial) A. RANDALL M HANSON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 840 ALLEGHANY		Transaction ID: A2006-1164302
City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 29.74	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.09	

Full Name (Last, First, Middle Initial) B. RANDALL M HANSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 840 ALLEGHANY		Transaction ID: A2006-1358219
City State Zip Code GRAYSLAKE IL 60030	Amount of Each Receipt this Period 29.74	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.83	

Full Name (Last, First, Middle Initial) C. HERBERT L HARRIS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 1812 SOUTHVIEW CIRCLE		Transaction ID: A2006-1164264
City State Zip Code BIRMINGHAM AL 35244	Amount of Each Receipt this Period 28.43	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.13	

SUBTOTAL of Receipts This Page (optional) ▶	87.91
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. HERBERT L HARRIS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1812 SOUTHVIEW CIRCLE		Transaction ID: A2006-1358179	
City State Zip Code BIRMINGHAM AL 35244	Amount of Each Receipt this Period 28.43		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 479.56		

Full Name (Last, First, Middle Initial) B. MICHAEL L HARRISON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1141 WINNERS CIRCLE		Transaction ID: A2006-1164356	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 132.55		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2116.50		

Full Name (Last, First, Middle Initial) C. MICHAEL L HARRISON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1141 WINNERS CIRCLE		Transaction ID: A2006-1358274	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 132.55		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2249.05		

SUBTOTAL of Receipts This Page (optional) ▶	293.53
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. FREDRICH A HATCH		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 8313 STRATHMORE LANE		Transaction ID: A2006-1164320	
City ROANOKE	State VA	Zip Code 24019	Amount of Each Receipt this Period 16.35
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territory Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.60		

Full Name (Last, First, Middle Initial) B. FREDRICH A HATCH		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 8313 STRATHMORE LANE		Transaction ID: A2006-1358238	
City ROANOKE	State VA	Zip Code 24019	Amount of Each Receipt this Period 16.35
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territory Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.95		

Full Name (Last, First, Middle Initial) C. KEITH A HAUSCHILDT		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 636 ROSEDALE AVE		Transaction ID: A2006-1164048	
City ROSELLE	State IL	Zip Code 60172	Amount of Each Receipt this Period 15.08
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP AF Operations & Techn		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.52		

SUBTOTAL of Receipts This Page (optional) ▶	47.78
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 / 314
	<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)
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 ▼ 251.60

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357956

Amount of Each Receipt this Period
15.08

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

Mailing Address 28365 West Big Hollow Road

City Ingleside State IL Zip Code 60041

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 ▼ 986.33

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164046

Amount of Each Receipt this Period
62.70

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

Mailing Address 28365 West Big Hollow Road

City Ingleside State IL Zip Code 60041

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 ▼ 1049.03

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357954

Amount of Each Receipt this Period
62.70

SUBTOTAL of Receipts This Page (optional)	▶	140.48
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 113 / 314
	(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

Full Name (Last, First, Middle Initial) A. RICHARD J HENEBERRY		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006	
Mailing Address 23 CLAYTON		Transaction ID: A2006-1164077	
City State Zip Code LAKE VILLA IL 60046		Amount of Each Receipt this Period 23.23	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Intract Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.45	

Full Name (Last, First, Middle Initial) B. RICHARD J HENEBERRY		Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2006	
Mailing Address 23 CLAYTON		Transaction ID: A2006-1357985	
City State Zip Code LAKE VILLA IL 60046		Amount of Each Receipt this Period 23.23	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Intract Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 388.68	

Full Name (Last, First, Middle Initial) C. ROBERT L HERRING		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006	
Mailing Address 4337 SPRUCE BOUGH DR		Transaction ID: A2006-1164260	
City State Zip Code MARIETTA GA 30062		Amount of Each Receipt this Period 28.42	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 448.57	

SUBTOTAL of Receipts This Page (optional) ▶	74.88
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 / 314
	<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 L HERRING

Mailing Address 4337 SPRUCE BOUGH DR

City State Zip Code
MARIETTA GA 30062

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

Name of Employer Allstate Insurance Company Occupation Distribution Support Lead

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 476.99

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358175

Amount of Each Receipt this Period
28.42

B. Full Name (Last, First, Middle Initial)
EDDIE H HILL

Mailing Address 701 GOODLAND AVE.

City State Zip Code
ROANOKE VA 24019

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

Name of Employer Allstate Insurance Company Occupation Territory Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.86

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1163994

Amount of Each Receipt this Period
13.76

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 Vice President Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1038.74

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164004

Amount of Each Receipt this Period
77.28

SUBTOTAL of Receipts This Page (optional)	▶	119.46
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 / 314
	(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

Full Name (Last, First, Middle Initial) A. WILLIAM G HILL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 2935 GLENARYE DRIVE		Transaction ID: A2006-1357910
City State Zip Code LINDENHURST IL 60046	Amount of Each Receipt this Period 77.28	
FEC ID number of contributing federal political committee. C		
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 ▼ 1116.02	

Full Name (Last, First, Middle Initial) B. EDDIE H HILL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 701 GOODLAND AVE.		Transaction ID: A2006-1357900
City State Zip Code ROANOKE VA 24019	Amount of Each Receipt this Period 13.76	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Territory Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.62	

Full Name (Last, First, Middle Initial) C. SHERYL L HODGES		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 2510 OAK AVENUE		Transaction ID: A2006-1164166
City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.65	

SUBTOTAL of Receipts This Page (optional) ▶	106.04
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SHERYL L HODGES		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 2510 OAK AVENUE		Transaction ID: A2006-1358075
City NORTHBROOK	State IL	Zip Code 60062
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 15.00
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 ▼ 277.65	

Full Name (Last, First, Middle Initial) B. MERRILD A HOOVER		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 49 DORAL STREET		Transaction ID: A2006-1164008
City HURRICANE	State WV	Zip Code 25526
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 22.46
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 359.36	

Full Name (Last, First, Middle Initial) C. MERRILD A HOOVER		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 49 DORAL STREET		Transaction ID: A2006-1357914
City HURRICANE	State WV	Zip Code 25526
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 22.46
Name of Employer Allstate Insurance Company	Occupation Market Distribution Leade	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 381.82	

SUBTOTAL of Receipts This Page (optional)	59.92
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

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

Name of Employer Allstate Insurance Company Occupation Communication Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.53

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164252

Amount of Each Receipt this Period
19.88

B. Full Name (Last, First, Middle Initial)
MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

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

Name of Employer Allstate Insurance Company Occupation Communication Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.41

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358167

Amount of Each Receipt this Period
19.88

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

Mailing Address 1225 N. BURGANDY TRAIL

City State Zip Code
JACKSONVILLE FL 32259

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

Name of Employer Allstate Insurance Company Occupation Finance Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.88

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163985

Amount of Each Receipt this Period
14.08

SUBTOTAL of Receipts This Page (optional)	▶	53.84
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL S HURLEY		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1225 N. BURGANDY TRAIL		Transaction ID: A2006-1357891	
City State Zip Code JACKSONVILLE FL 32259	Amount of Each Receipt this Period 14.08		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Finance Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.96		

Full Name (Last, First, Middle Initial) B. STEPHEN L IHM		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 21558 W GOLDFINCH CT		Transaction ID: A2006-1164163	
City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 39.77		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 643.11		

Full Name (Last, First, Middle Initial) C. STEPHEN L IHM		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 21558 W GOLDFINCH CT		Transaction ID: A2006-1358072	
City State Zip Code KILDEER IL 60047	Amount of Each Receipt this Period 39.77		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 682.88		

SUBTOTAL of Receipts This Page (optional) ▶	93.62
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 / 314
	<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)
KENNETH A IRVIN

Mailing Address 6352 CRAGIE HILL CT

City State Zip Code
DUBLIN OH 43017

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

Name of Employer Allstate Insurance Company Occupation Regional Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163982

Amount of Each Receipt this Period
15.50

B. Full Name (Last, First, Middle Initial)
KENNETH A IRVIN

Mailing Address 6352 CRAGIE HILL CT

City State Zip Code
DUBLIN OH 43017

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

Name of Employer Allstate Insurance Company Occupation Regional Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 263.50

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357888

Amount of Each Receipt this Period
15.50

C. 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 ▼ 415.92

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164121

Amount of Each Receipt this Period
26.27

SUBTOTAL of Receipts This Page (optional)	▶	57.27
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LYNNE A IVERSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 890 BLAZING STAR TRAIL		Transaction ID: A2006-1358030
City State Zip Code CARY IL 60013	Amount of Each Receipt this Period 26.27	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior Sourcing Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 442.19	

Full Name (Last, First, Middle Initial) B. BOB A JACKSON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 226 Maison Court		Transaction ID: A2006-1164311
City State Zip Code Altamonte Springs FL 32714	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.08	

Full Name (Last, First, Middle Initial) C. BOB A JACKSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 226 Maison Court		Transaction ID: A2006-1358228
City State Zip Code Altamonte Springs FL 32714	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.96	

SUBTOTAL of Receipts This Page (optional) ▶	66.03
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 121 / 314
	(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

Full Name (Last, First, Middle Initial) A. JAMES C JAMIESON		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-1164090
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.52
Name of Employer Allstate Insurance Company	Occupation F&P/Enterprise Risk Manag	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 483.07	

Full Name (Last, First, Middle Initial) B. JAMES C JAMIESON		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-1357998
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.52
Name of Employer Allstate Insurance Company	Occupation F&P/Enterprise Risk Manag	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 513.59	

Full Name (Last, First, Middle Initial) C. LINDA K JANCIK		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 479 FLOCK AVENUE		Transaction ID: A2006-1164325
City NAPERVILLE	State IL	Zip Code 60565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.60
Name of Employer Allstate Insurance Company	Occupation Sales Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.36	

SUBTOTAL of Receipts This Page (optional)	73.64
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LINDA K JANCIK		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 479 FLOCK AVENUE		Transaction ID: A2006-1358243	
City NAPERVILLE	State IL	Zip Code 60565	Amount of Each Receipt this Period 12.60
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Operations Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.96		

Full Name (Last, First, Middle Initial) B. LARRY D JOHNSON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 21943 W VERNON RIDGE DRIVE		Transaction ID: A2006-1164071	
City MUNDELEIN	State IL	Zip Code 60060	Amount of Each Receipt this Period 51.96
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Catastrophe Managemen		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 824.22		

Full Name (Last, First, Middle Initial) C. RONALD JOHNSON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1726 R.F.D		Transaction ID: A2006-1164306	
City LONG GROVE	State IL	Zip Code 60047	Amount of Each Receipt this Period 14.39
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Allstate Force Develo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.53		

SUBTOTAL of Receipts This Page (optional) ▶	78.95
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RONALD JOHNSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1726 R.F.D		Transaction ID: A2006-1358223
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 14.39	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Allstate Force Develo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.92	

Full Name (Last, First, Middle Initial) B. LARRY D JOHNSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 21943 W VERNON RIDGE DRIVE		Transaction ID: A2006-1357979
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 51.96	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Catastrophe Managemen	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 876.18	

Full Name (Last, First, Middle Initial) C. LEWIS L JONES		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address P.O. BOX 498		Transaction ID: A2006-1164007
City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 15.57	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.06	

SUBTOTAL of Receipts This Page (optional) ▶	81.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 124 / 314
	(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)
LEWIS L JONES

Mailing Address P.O. BOX 498

City State Zip Code
WADSWORTH IL 60083

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 ▼
257.63

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357913

Amount of Each Receipt this Period
15.57

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

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
CHICAGO IL 60646

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.07

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164151

Amount of Each Receipt this Period
39.77

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

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
CHICAGO IL 60646

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

Name of Employer Allstate Insurance Company Occupation Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
689.84

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358059

Amount of Each Receipt this Period
39.77

SUBTOTAL of Receipts This Page (optional)	▶	95.11
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 125 / 314
	(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

Full Name (Last, First, Middle Initial) A. JOHN A KANE		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1 LONGLEY PLACE		Transaction ID: A2006-1163927
City HUNTINGTON STA	State NY	Zip Code 11746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.31
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.96	

Full Name (Last, First, Middle Initial) B. JOHN A KANE		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 1 LONGLEY PLACE		Transaction ID: A2006-1357829
City HUNTINGTON STA	State NY	Zip Code 11746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.31
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.27	

Full Name (Last, First, Middle Initial) C. TIMOTHY M KATHRENS		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 703 HIGHLAND CT		Transaction ID: A2006-1164242
City GRAYSLAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.47
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.07	

SUBTOTAL of Receipts This Page (optional)	▶	47.09
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 314
	<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)
TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Allstate Insurance Company Occupation CC IT Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.68

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358157

Amount of Each Receipt this Period
15.61

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

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
PARKER CO 80134

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1184.02

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164316

Amount of Each Receipt this Period
74.64

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

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
PARKER CO 80134

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1258.66

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358234

Amount of Each Receipt this Period
74.64

SUBTOTAL of Receipts This Page (optional)	▶	164.89
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARY KEITH		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2309 RFD		Transaction ID: A2006-1164345	
City LONG GROVE	State IL	Amount of Each Receipt this Period 16.60	
Zip Code 60047		Transaction ID: A2006-1164345	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.60	
Name of Employer Allstate Insurance Company	Occupation Finance Director	Amount of Each Receipt this Period 16.60	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 263.20	Amount of Each Receipt this Period 16.60	

Full Name (Last, First, Middle Initial) B. MARY KEITH		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2309 RFD		Transaction ID: A2006-1358263	
City LONG GROVE	State IL	Amount of Each Receipt this Period 16.60	
Zip Code 60047		Transaction ID: A2006-1358263	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.60	
Name of Employer Allstate Insurance Company	Occupation Finance Director	Amount of Each Receipt this Period 16.60	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.80	Amount of Each Receipt this Period 16.60	

Full Name (Last, First, Middle Initial) C. TERRY KELAHER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 924 W. CHESTERFIELD CT.		Transaction ID: A2006-1164160	
City PALATINE	State IL	Amount of Each Receipt this Period 78.13	
Zip Code 60067		Transaction ID: A2006-1164160	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.13	
Name of Employer Allstate Insurance Company	Occupation Vice President & General	Amount of Each Receipt this Period 78.13	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1236.22	Amount of Each Receipt this Period 78.13	

SUBTOTAL of Receipts This Page (optional) ▶	111.33
TOTAL This Period (last page this line number only) ▶	111.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. TERRY KELAHER		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 924 W. CHESTERFIELD CT.		Transaction ID: A2006-1358069
City PALATINE	State IL	Zip Code 60067
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.13
Name of Employer Allstate Insurance Company	Occupation Vice President & General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1314.35	

Full Name (Last, First, Middle Initial) B. DAVID E KENNEY		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 622 SEDGWICK DR.		Transaction ID: A2006-1164187
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.43
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.58	

Full Name (Last, First, Middle Initial) C. DAVID E KENNEY		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 622 SEDGWICK DR.		Transaction ID: A2006-1358096
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.43
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.01	

SUBTOTAL of Receipts This Page (optional)	116.99
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOSEPH A KENNY		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 194 PEREGRINE LANE		Transaction ID: A2006-1164141
City State Zip Code HAWTHORN WOODS IL 60047	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 14.29
Name of Employer Allstate Insurance Company	Occupation Actuary and Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.64	

Full Name (Last, First, Middle Initial) B. JOSEPH A KENNY		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 194 PEREGRINE LANE		Transaction ID: A2006-1358049
City State Zip Code HAWTHORN WOODS IL 60047	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 14.29
Name of Employer Allstate Insurance Company	Occupation Actuary and Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.93	

Full Name (Last, First, Middle Initial) C. CHRISTOPHER R KIAH		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1975 ROSE TERRACE		Transaction ID: A2006-1163906
City State Zip Code RIVERWOODS IL 60015	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 39.76
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 632.91	

SUBTOTAL of Receipts This Page (optional)	▶	68.34
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 / 314
	<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)
CHRISTOPHER R KIAH

Mailing Address 1975 ROSE TERRACE

City RIVERWOODS State IL Zip Code 60015

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 ▼ 672.67

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2006

Transaction ID: A2006-1357809

Amount of Each Receipt this Period
 39.76

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

Mailing Address 1332 BAY MEADOWS DR

City BARTLETT State IL Zip Code 60103

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 552.34

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2006

Transaction ID: A2006-1164093

Amount of Each Receipt this Period
 35.14

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

Mailing Address 1332 BAY MEADOWS DR

City BARTLETT State IL Zip Code 60103

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 587.48

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2006

Transaction ID: A2006-1358001

Amount of Each Receipt this Period
 35.14

SUBTOTAL of Receipts This Page (optional)	▶	110.04
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAUL N KIERIG		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 200 OXFORD RD		Transaction ID: A2006-1164145
City State Zip Code Tower Lakes IL 60010	Amount of Each Receipt this Period 24.01	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.87	

Full Name (Last, First, Middle Initial) B. PAUL N KIERIG		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 200 OXFORD RD		Transaction ID: A2006-1358053
City State Zip Code Tower Lakes IL 60010	Amount of Each Receipt this Period 24.01	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 404.88	

Full Name (Last, First, Middle Initial) C. BARBARA L KILROY		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1036 VINEYARD DRIVE		Transaction ID: A2006-1163991
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 16.67	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Audit Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.60	

SUBTOTAL of Receipts This Page (optional) ▶	64.69
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 132 / 314
	(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

Full Name (Last, First, Middle Initial) A. BARBARA L KILROY		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1036 VINEYARD DRIVE		Transaction ID: A2006-1357897	
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 16.67		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Audit Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.27		

Full Name (Last, First, Middle Initial) B. JAMES P KING		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 592 TURNER AVENUE		Transaction ID: A2006-1164215	
City State Zip Code GLEN ELLYN IL 60137	Amount of Each Receipt this Period 34.45		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 545.40		

Full Name (Last, First, Middle Initial) C. JAMES P KING		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 592 TURNER AVENUE		Transaction ID: A2006-1358125	
City State Zip Code GLEN ELLYN IL 60137	Amount of Each Receipt this Period 34.45		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 579.85		

SUBTOTAL of Receipts This Page (optional) ▶	85.57
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LAURA S KISTNER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 22047 W. PETOSKEY CT		Transaction ID: A2006-1164276
City State Zip Code PLAINFIELD IL 60544	Amount of Each Receipt this Period 15.69	
FEC ID number of contributing federal political committee. C		
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 ▼ 248.04	

Full Name (Last, First, Middle Initial) B. LAURA S KISTNER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 22047 W. PETOSKEY CT		Transaction ID: A2006-1358193
City State Zip Code PLAINFIELD IL 60544	Amount of Each Receipt this Period 17.34	
FEC ID number of contributing federal political committee. C		
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 ▼ 265.38	

Full Name (Last, First, Middle Initial) C. KEITH A KNAPP		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 175 Macarthur Dr		Transaction ID: A2006-1164062
City State Zip Code Willowbrook IL 60527	Amount of Each Receipt this Period 17.06	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Director DSN & CONST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.86	

SUBTOTAL of Receipts This Page (optional) ▶	50.09
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 134 / 314						
	(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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KEITH A KNAPP		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 175 Macarthur Dr		Transaction ID: A2006-1357969	
City State Zip Code Willowbrook IL 60527	Amount of Each Receipt this Period 17.06		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Director DSN & CONST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.92		

Full Name (Last, First, Middle Initial) B. MARY G KNIPP		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2050 GLENDALE AVENUE		Transaction ID: A2006-1164082	
City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 19.66		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Allstate Financial Market		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.71		

Full Name (Last, First, Middle Initial) C. JEFFREY D KNIPP		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2050 GLENDALE AVE		Transaction ID: A2006-1164299	
City State Zip Code NORTHBROOK IL 60062	Amount of Each Receipt this Period 26.66		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 421.41		

SUBTOTAL of Receipts This Page (optional) ▶	63.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARY G KNIPP		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 2050 GLENDALE AVENUE		Transaction ID: A2006-1357990
City NORTHBROOK State IL Zip Code 60062	Amount of Each Receipt this Period 19.66	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Allstate Financial Market	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.37	

Full Name (Last, First, Middle Initial) B. JEFFREY D KNIPP		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 2050 GLENDALE AVE		Transaction ID: A2006-1358216
City NORTHBROOK State IL Zip Code 60062	Amount of Each Receipt this Period 26.66	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 448.07	

Full Name (Last, First, Middle Initial) C. GARY L KOCHANЕК		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 743 CARDIGAN CT		Transaction ID: A2006-1164100
City NAPERVILLE State IL Zip Code 60565	Amount of Each Receipt this Period 32.70	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 523.20	

SUBTOTAL of Receipts This Page (optional) ▶	79.02
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 136 / 314
	(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

Full Name (Last, First, Middle Initial) A. GARY L KOCHANEK		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 743 CARDIGAN CT		Transaction ID: A2006-1358008	
City NAPERVILLE	State IL	Zip Code 60565	Amount of Each Receipt this Period 32.70
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.90		

Full Name (Last, First, Middle Initial) B. JOANNE L KRON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 341 N FIORE PARKWAY		Transaction ID: A2006-1164095	
City VERNON HILLS	State IL	Zip Code 60061	Amount of Each Receipt this Period 39.77
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 672.12		

Full Name (Last, First, Middle Initial) C. JOANNE L KRON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 341 N FIORE PARKWAY		Transaction ID: A2006-1358003	
City VERNON HILLS	State IL	Zip Code 60061	Amount of Each Receipt this Period 39.77
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 711.89		

SUBTOTAL of Receipts This Page (optional) ▶	112.24
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 / 314
	<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 A LA MONICA

Mailing Address 22401 BROOKSIDE WAY

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1031.98

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164149

Amount of Each Receipt this Period
65.33

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

Mailing Address 22401 BROOKSIDE WAY

City State Zip Code
LAKE BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation Vice President Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1097.31

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358057

Amount of Each Receipt this Period
65.33

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

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 668.72

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163931

Amount of Each Receipt this Period
42.67

SUBTOTAL of Receipts This Page (optional)	▶	173.33
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 138 / 314
	(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

Full Name (Last, First, Middle Initial) A. ANTHONY LASKA		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 2707 SKYLINE DRIVE		Transaction ID: A2006-1357833
City CRYSTAL LAKE	State IL	Zip Code 60012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.67
Name of Employer Allstate Insurance Company	Occupation AVP Technology Shared Ser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 711.39	

Full Name (Last, First, Middle Initial) B. DEBORAH G LAWRENCE		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 910 S MICHIGAN AVE #1501		Transaction ID: A2006-1164070
City CHICAGO	State IL	Zip Code 60605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.08	

Full Name (Last, First, Middle Initial) C. DEBORAH G LAWRENCE		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 910 S MICHIGAN AVE #1501		Transaction ID: A2006-1357977
City CHICAGO	State IL	Zip Code 60605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.96	

SUBTOTAL of Receipts This Page (optional)	82.43
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 / 314
	<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)
PHILLIP E LAWSON

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1098.82

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1164305

Amount of Each Receipt this Period
69.56

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

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Allstate Insurance Company Occupation Vice President Field

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1168.38

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 8 / 2 0 0 6

Transaction ID: A2006-1358222

Amount of Each Receipt this Period
69.56

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

Mailing Address 910 S MICHIGAN AVE #1503

City State Zip Code
CHICAGO IL 60605

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

Name of Employer Allstate Insurance Company Occupation Vice President Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 767.98

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1163918

Amount of Each Receipt this Period
55.62

SUBTOTAL of Receipts This Page (optional)	▶	194.74
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CATHY A LAZAROFF		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 910 S MICHIGAN AVE #1503		Transaction ID: A2006-1357820	
City State Zip Code CHICAGO IL 60605	Amount of Each Receipt this Period 55.62		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 823.60		

Full Name (Last, First, Middle Initial) B. MICHELLE LEE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1404 100TH AVENUE NE		Transaction ID: A2006-1164353	
City State Zip Code BELLEVUE WA 98004	Amount of Each Receipt this Period 54.04		
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 ▼ 853.65		

Full Name (Last, First, Middle Initial) C. MICHELLE LEE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1404 100TH AVENUE NE		Transaction ID: A2006-1358271	
City State Zip Code BELLEVUE WA 98004	Amount of Each Receipt this Period 54.04		
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 ▼ 907.69		

SUBTOTAL of Receipts This Page (optional) ▶	163.70
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 141 / 314						
	(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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SUSAN L LEES		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1705 DARTMOUTH LN		Transaction ID: A2006-1163904
City DEERFIELD	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.27
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.85	

Full Name (Last, First, Middle Initial) B. SUSAN L LEES		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 1705 DARTMOUTH LN		Transaction ID: A2006-1357807
City DEERFIELD	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.27
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 387.12	

Full Name (Last, First, Middle Initial) C. ANDREW P LEICHT		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 25658 N ARROWHEAD		Transaction ID: A2006-1164105
City MUNDELEIN	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.69
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 ▼ 523.04	

SUBTOTAL of Receipts This Page (optional)	79.23
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANDREW P LEICHT		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 25658 N ARROWHEAD		Transaction ID: A2006-1358014
City MUNDELEIN	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.69
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 ▼ 555.73	

Full Name (Last, First, Middle Initial) B. NANCY L LEMKE		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 5697 BROOKSTONE WALK		Transaction ID: A2006-1164171
City ACWORTH	State GA	Zip Code 30101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.85
Name of Employer Allstate Insurance Company	Occupation Senior Field Corporate Re	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.85	

Full Name (Last, First, Middle Initial) C. NANCY L LEMKE		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 5697 BROOKSTONE WALK		Transaction ID: A2006-1358080
City ACWORTH	State GA	Zip Code 30101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.85
Name of Employer Allstate Insurance Company	Occupation Senior Field Corporate Re	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.70	

SUBTOTAL of Receipts This Page (optional)	74.39
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KELLY J LIEN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 3 BEDFORD COURT		Transaction ID: A2006-1164326	
City HAWTHORN WOODS	State IL	Zip Code 60047	Amount of Each Receipt this Period 16.69
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.64		

Full Name (Last, First, Middle Initial) B. KELLY J LIEN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 3 BEDFORD COURT		Transaction ID: A2006-1358244	
City HAWTHORN WOODS	State IL	Zip Code 60047	Amount of Each Receipt this Period 16.69
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 281.33		

Full Name (Last, First, Middle Initial) C. TERESA G LOGUE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 7187 PRESIDENTIAL DRIVE		Transaction ID: A2006-1164126	
City GURNEE	State IL	Zip Code 60031	Amount of Each Receipt this Period 21.27
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Direct Response		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.92		

SUBTOTAL of Receipts This Page (optional) ▶	54.65
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. TERESA G LOGUE		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 7187 PRESIDENTIAL DRIVE		Transaction ID: A2006-1358035
City GURNEE	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.27
Name of Employer Allstate Insurance Company	Occupation AVP Direct Response	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 353.19	

Full Name (Last, First, Middle Initial) B. CHRISTOPHER T LONGEWAY		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1134 W. PATTERSON		Transaction ID: A2006-1164159
City CHICAGO	State IL	Zip Code 60613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.02
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 427.17	

Full Name (Last, First, Middle Initial) C. CHRISTOPHER T LONGEWAY		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 1134 W. PATTERSON		Transaction ID: A2006-1358068
City CHICAGO	State IL	Zip Code 60613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.02
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 454.19	

SUBTOTAL of Receipts This Page (optional)	75.31
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD E LOTT		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 4666 SW HAMMOCK CREEK DR		Transaction ID: A2006-1164030
City State Zip Code PALM CITY FL 34990	Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.60	

Full Name (Last, First, Middle Initial) B. RICHARD E LOTT		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 4666 SW HAMMOCK CREEK DR		Transaction ID: A2006-1357938
City State Zip Code PALM CITY FL 34990	Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.95	

Full Name (Last, First, Middle Initial) C. JOHN C LOUNDS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 4424 STONEHAVEN		Transaction ID: A2006-1164240
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 35.40	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Product AF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 558.00	

SUBTOTAL of Receipts This Page (optional) ▶	68.10
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 / 314
	<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)
JOHN C LOUNDS

Mailing Address 4424 STONEHAVEN

City State Zip Code
LONG GROVE IL 60047

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

Name of Employer Allstate Insurance Company Occupation Vice President Product AF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 593.40

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358155

Amount of Each Receipt this Period
35.40

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 Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.48

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164174

Amount of Each Receipt this Period
12.83

C. 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 Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.31

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358083

Amount of Each Receipt this Period
12.83

SUBTOTAL of Receipts This Page (optional)	▶	61.06
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 / 314
	<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)
BENJAMIN E LUMICAO

Mailing Address 343 S. DEARBORN ST.

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 ▼ 464.50

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164200

Amount of Each Receipt this Period
29.40

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

Mailing Address 343 S. DEARBORN ST.

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 ▼ 493.90

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358110

Amount of Each Receipt this Period
29.40

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 Allstate Insurance Company Occupation Regional Distribution Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.11

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164251

Amount of Each Receipt this Period
22.96

SUBTOTAL of Receipts This Page (optional)	▶	81.76
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DANIEL J MACDONALD		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 2250 RIDGETRAIL DR		Transaction ID: A2006-1358166
City State Zip Code CASTLE ROCK CO 80104	Amount of Each Receipt this Period 22.96	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 388.07	

Full Name (Last, First, Middle Initial) B. MORRIS A MADURO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address PO BOX 4343		Transaction ID: A2006-1163930
City State Zip Code NAPERVILLE IL 60567	Amount of Each Receipt this Period 36.22	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.07	

Full Name (Last, First, Middle Initial) C. MORRIS A MADURO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address PO BOX 4343		Transaction ID: A2006-1357832
City State Zip Code NAPERVILLE IL 60567	Amount of Each Receipt this Period 36.22	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 606.29	

SUBTOTAL of Receipts This Page (optional) ▶	95.40
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KATHERINE MALCOMSON		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 185 NILES EAST		Transaction ID: A2006-1164235	
City LAKE FOREST	State IL	Zip Code 60045	Amount of Each Receipt this Period 18.35
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Education and Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.85		

Full Name (Last, First, Middle Initial) B. KATHERINE MALCOMSON		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 185 NILES EAST		Transaction ID: A2006-1358146	
City LAKE FOREST	State IL	Zip Code 60045	Amount of Each Receipt this Period 18.35
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Education and Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.20		

Full Name (Last, First, Middle Initial) C. FELIX A MANTILLA		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 28601 N. Sky Crest Drive		Transaction ID: A2006-1164253	
City Ivanhoe	State IL	Zip Code 60060	Amount of Each Receipt this Period 45.38
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 714.46		

SUBTOTAL of Receipts This Page (optional) ▶	82.08
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 150 / 314
	(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

Full Name (Last, First, Middle Initial) A. FELIX A MANTILLA		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 28601 N. Sky Crest Drive		Transaction ID: A2006-1358168	
City State Zip Code Ivanhoe IL 60060		Amount of Each Receipt this Period 45.38	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 759.84	

Full Name (Last, First, Middle Initial) B. KENNETH P MARCOTTE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2311 HAVERTON DR		Transaction ID: A2006-1164110	
City State Zip Code MUNDELEIN IL 60060		Amount of Each Receipt this Period 17.38	
FEC ID number of contributing federal political committee. C			
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 ▼ 274.73	

Full Name (Last, First, Middle Initial) C. KENNETH P MARCOTTE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2311 HAVERTON DR		Transaction ID: A2006-1358019	
City State Zip Code MUNDELEIN IL 60060		Amount of Each Receipt this Period 17.38	
FEC ID number of contributing federal political committee. C			
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 ▼ 292.11	

SUBTOTAL of Receipts This Page (optional) ▶	80.14
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL P MARK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 3178 HAVEN LANE		Transaction ID: A2006-1358086	
City LINDENHURST	State IL	Zip Code 60046	Amount of Each Receipt this Period 12.19
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Planning Con		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.48		

Full Name (Last, First, Middle Initial) B. JOHN R MATHEWS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 401 E NORTH AVENUE		Transaction ID: A2006-1164201	
City LAKE BLUFF	State IL	Zip Code 60044	Amount of Each Receipt this Period 19.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.01		

Full Name (Last, First, Middle Initial) C. JOHN R MATHEWS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 401 E NORTH AVENUE		Transaction ID: A2006-1358111	
City LAKE BLUFF	State IL	Zip Code 60044	Amount of Each Receipt this Period 19.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.89		

SUBTOTAL of Receipts This Page (optional) ▶	51.95
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. W. D Mays		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 256 Post Oak Drive		Transaction ID: A2006-1164003	
City State Zip Code Roanoke VA 24019	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territory Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.85		

Full Name (Last, First, Middle Initial) B. W. D Mays		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 256 Post Oak Drive		Transaction ID: A2006-1357909	
City State Zip Code Roanoke VA 24019	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territory Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.20		

Full Name (Last, First, Middle Initial) C. MICHAEL J MC CABE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 8 S. WYNSTONE DRIVE		Transaction ID: A2006-1164318	
City State Zip Code N. BARRINGTON IL 60010	Amount of Each Receipt this Period 115.39		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP & Chief Legal Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1784.85		

SUBTOTAL of Receipts This Page (optional) ▶	148.09
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 / 314
	<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 MC CABE

Mailing Address 8 S. WYNSTONE 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 & Chief Legal Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.24

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358236

Amount of Each Receipt this Period
115.39

B. Full Name (Last, First, Middle Initial)
GERARD F MC DERMOTT

Mailing Address 5378 BLACK BEAR LANE

City State Zip Code
ROANOKE VA 24014

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

Name of Employer Allstate Insurance Company Occupation AVP Operations Center

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 467.92

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1163917

Amount of Each Receipt this Period
29.63

C. Full Name (Last, First, Middle Initial)
GERARD F MC DERMOTT

Mailing Address 5378 BLACK BEAR LANE

City State Zip Code
ROANOKE VA 24014

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

Name of Employer Allstate Insurance Company Occupation AVP Operations Center

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 497.55

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357819

Amount of Each Receipt this Period
29.63

SUBTOTAL of Receipts This Page (optional) ► 174.65

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 154 / 314
	(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)
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 ▼ 1152.91

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164185

Amount of Each Receipt this Period
72.70

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

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
BARRINGTON HILL IL 60010

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1225.61

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358094

Amount of Each Receipt this Period
72.70

C. Full Name (Last, First, Middle Initial)
DAVID A MC HALE

Mailing Address 8756 MAPLE HOLLOW CT.

City State Zip Code
GRANITE BAY CA 95746

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 ▼ 872.13

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164127

Amount of Each Receipt this Period
53.02

SUBTOTAL of Receipts This Page (optional)	▶	198.42
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOHN A MC LAUGHLIN		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 25748 N. Stoney Kirk Ct.		Transaction ID: A2006-1164136
City State Zip Code Hawthorn Woods IL 60047	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.36
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 ▼ 606.76	

Full Name (Last, First, Middle Initial) B. JOHN A MC LAUGHLIN		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 25748 N. Stoney Kirk Ct.		Transaction ID: A2006-1358044
City State Zip Code Hawthorn Woods IL 60047	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.36
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 ▼ 645.12	

Full Name (Last, First, Middle Initial) C. PATRICIA M MCCARTHY		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 222 STONE FENCE ROAD		Transaction ID: A2006-1163946
City State Zip Code VERNON HILLS IL 60061	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.88
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.88	

SUBTOTAL of Receipts This Page (optional)	▶	96.60
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 156 / 314
	(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

Full Name (Last, First, Middle Initial) A. SALLY J MCCARTHY		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1036 ROLLING PASS		Transaction ID: A2006-1164183
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 12.92	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Manager Bonus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.82	

Full Name (Last, First, Middle Initial) B. PATRICIA M MCCARTHY		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 222 STONE FENCE ROAD		Transaction ID: A2006-1357848
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claim Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.76	

Full Name (Last, First, Middle Initial) C. SALLY J MCCARTHY		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1036 ROLLING PASS		Transaction ID: A2006-1358092
City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 12.92	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Manager Bonus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.74	

SUBTOTAL of Receipts This Page (optional) ▶	45.72
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CHARLES V MCCLELLAN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 5561 HILLTOP LN		Transaction ID: A2006-1164023	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 15.54
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.34		

Full Name (Last, First, Middle Initial) B. BRIAN D MCCLELLAN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2206 W. LAWRENCE LANE		Transaction ID: A2006-1164181	
City MT. PROSPECT	State IL	Zip Code 60056	Amount of Each Receipt this Period 14.74
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.34		

Full Name (Last, First, Middle Initial) C. CHARLES V MCCLELLAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 5561 HILLTOP LN		Transaction ID: A2006-1357930	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 15.54
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.88		

SUBTOTAL of Receipts This Page (optional) ▶	45.82
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 / 314
	<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 D MCCLELLAN

Mailing Address 2206 W. LAWRENCE LANE

City State Zip Code
MT. PROSPECT IL 60056

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 ▼ 248.08

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358090

Amount of Each Receipt this Period
14.74

B. Full Name (Last, First, Middle Initial)
JOSEPH P MCCORMICK

Mailing Address 808 PARKDALE CT.

City State Zip Code
SOUTHLAKE TX 76092

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 ▼ 209.91

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1163989

Amount of Each Receipt this Period
13.31

C. Full Name (Last, First, Middle Initial)
JOSEPH P MCCORMICK

Mailing Address 808 PARKDALE CT.

City State Zip Code
SOUTHLAKE TX 76092

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 ▼ 223.22

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357895

Amount of Each Receipt this Period
13.31

SUBTOTAL of Receipts This Page (optional)	▶	41.36
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CHARLTON T MCDONALD		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 195 ALPINE DRIVE		Transaction ID: A2006-1164085	
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 25.29		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Insurance Reserve		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 398.62		

Full Name (Last, First, Middle Initial) B. CHARLTON T MCDONALD		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 195 ALPINE DRIVE		Transaction ID: A2006-1357993	
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 25.29		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Insurance Reserve		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.91		

Full Name (Last, First, Middle Initial) C. MARK J MCDONNELL		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 70 MC ECHRON LANE		Transaction ID: A2006-1163967	
City State Zip Code QUEENSBURY NY 12804	Amount of Each Receipt this Period 25.03		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Regional Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.23		

SUBTOTAL of Receipts This Page (optional) ▶	75.61
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARK J MCDONNELL		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 70 MC ECHRON LANE		Transaction ID: A2006-1357872
City QUEENSBURY	State NY	Zip Code 12804
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.03
Name of Employer Allstate Insurance Company	Occupation Regional Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.26	

Full Name (Last, First, Middle Initial) B. MARK A MCGILLIVRAY		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1028 PORTSMOUTH CIRCLE		Transaction ID: A2006-1164327
City GURNEE	State IL	Zip Code 60031
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 19.73
Name of Employer Allstate Insurance Company	Occupation AVP PCCSO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.10	

Full Name (Last, First, Middle Initial) C. MARK A MCGILLIVRAY		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 1028 PORTSMOUTH CIRCLE		Transaction ID: A2006-1358245
City GURNEE	State IL	Zip Code 60031
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 19.73
Name of Employer Allstate Insurance Company	Occupation AVP PCCSO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.83	

SUBTOTAL of Receipts This Page (optional)	64.49
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 / 314
	<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)
EVA M MCINTEE

Mailing Address 28 MANCERA

City RANCHO SANTA MA State CA Zip Code 92688

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.13

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1164322

Amount of Each Receipt this Period
 28.43

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

Mailing Address 28 MANCERA

City RANCHO SANTA MA State CA Zip Code 92688

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

Name of Employer Allstate Insurance Company Occupation Marketing Claims Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 479.56

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 8 / 2 0 0 6

Transaction ID: A2006-1358240

Amount of Each Receipt this Period
 28.43

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

Mailing Address 1207 DEVENS DRIVE

City BRENTWOOD State TN Zip Code 37027

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

Name of Employer Allstate Insurance Company Occupation Assistant Field Vice Pres

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 677.33

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 4 / 2 0 0 6

Transaction ID: A2006-1163998

Amount of Each Receipt this Period
 42.88

SUBTOTAL of Receipts This Page (optional)	▶	99.74
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 / 314
	<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 MCKINNEY

Mailing Address 1207 DEVENS DRIVE

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Allstate Insurance Company Occupation Assistant Field Vice Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.21

Date of Receipt
08 / 18 / 2006

Transaction ID: A2006-1357904

Amount of Each Receipt this Period
42.88

B. Full Name (Last, First, Middle Initial)
RONALD D MCNEIL

Mailing Address 76 HILLBURN LANE

City State Zip Code
NO BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation SVP-Protection Distributi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1768.29

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164238

Amount of Each Receipt this Period
112.15

C. Full Name (Last, First, Middle Initial)
RONALD D MCNEIL

Mailing Address 76 HILLBURN LANE

City State Zip Code
NO BARRINGTON IL 60010

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

Name of Employer Allstate Insurance Company Occupation SVP-Protection Distributi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1880.44

Date of Receipt
08 / 18 / 2006

Transaction ID: A2006-1358151

Amount of Each Receipt this Period
112.15

SUBTOTAL of Receipts This Page (optional)	▶	267.18
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PATRICIA S MCPHERSON		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 3133 N. Walker Lane West		Transaction ID: A2006-1164333
City State Zip Code Arlington Heights IL 60004	Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Field Product Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.25	

Full Name (Last, First, Middle Initial) B. PATRICIA S MCPHERSON		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 3133 N. Walker Lane West		Transaction ID: A2006-1358251
City State Zip Code Arlington Heights IL 60004	Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Field Product Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.60	

Full Name (Last, First, Middle Initial) C. JEFFREY J MCRAE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1213 THORNDALE LN		Transaction ID: A2006-1164041
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 18.97	
FEC ID number of contributing federal political committee. C		
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 ▼ 298.12	

SUBTOTAL of Receipts This Page (optional) ▶	51.67
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JEFFREY J MCRAE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1213 THORNDALE LN		Transaction ID: A2006-1357949	
City State Zip Code LAKE ZURICH IL 60047	Amount of Each Receipt this Period 18.97		
FEC ID number of contributing federal political committee. C			
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 ▼ 317.09		

Full Name (Last, First, Middle Initial) B. GARY A MELLINI		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 21050 PRESTWICK DRIVE		Transaction ID: A2006-1163924	
City State Zip Code BARRINGTON IL 60010	Amount of Each Receipt this Period 31.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 492.49		

Full Name (Last, First, Middle Initial) C. GARY A MELLINI		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 21050 PRESTWICK DRIVE		Transaction ID: A2006-1357826	
City State Zip Code BARRINGTON IL 60010	Amount of Each Receipt this Period 31.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 523.80		

SUBTOTAL of Receipts This Page (optional) ▶	81.59
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JANE M MELLON		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 184 GARFIELD		Transaction ID: A2006-1164116
City	State	Zip Code
ELMHURST	IL	60126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.82
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 ▼ 614.57	

Full Name (Last, First, Middle Initial) B. JANE M MELLON		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 184 GARFIELD		Transaction ID: A2006-1358025
City	State	Zip Code
ELMHURST	IL	60126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.82
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 ▼ 653.39	

Full Name (Last, First, Middle Initial) C. HANS H METZINGER		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 407 E. CLAIRE LANE		Transaction ID: A2006-1164168
City	State	Zip Code
PROSPECT HTS	IL	60070
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.84	

SUBTOTAL of Receipts This Page (optional)	▶	93.99
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 166 / 314
	(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)
HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City State Zip Code
PROSPECT HTS IL 60070

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

Name of Employer Allstate Insurance Company Occupation Distribution Support Lead

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 299.19

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358077

Amount of Each Receipt this Period
16.35

B. Full Name (Last, First, Middle Initial)
JOHN W MICHELI

Mailing Address 1328 FOREVER AVE

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼ 208.97

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357834

Amount of Each Receipt this Period
12.49

C. Full Name (Last, First, Middle Initial)
JACK C MIGDAL

Mailing Address 4240 FOREST GLEN DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60195

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 ▼ 261.60

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163949

Amount of Each Receipt this Period
16.35

SUBTOTAL of Receipts This Page (optional) ► 45.19

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 / 314
	<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)
JACK C MIGDAL

Mailing Address 4240 FOREST GLEN DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60195

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 ▼ 277.95

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357851

Amount of Each Receipt this Period
16.35

B. 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 Market Distribution Leade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 278.69

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164065

Amount of Each Receipt this Period
21.47

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

Mailing Address 1625 THORNEAPPLE LANE

City State Zip Code
ALGONQUIN IL 60102

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 ▼ 303.62

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164228

Amount of Each Receipt this Period
19.37

SUBTOTAL of Receipts This Page (optional)	▶	57.19
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 / 314
	<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)
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 Market Distribution Leade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.16

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357973

Amount of Each Receipt this Period
21.47

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

Mailing Address 1625 THORNEAPPLE LANE

City State Zip Code
ALGONQUIN IL 60102

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 ▼ 322.99

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358138

Amount of Each Receipt this Period
19.37

C. Full Name (Last, First, Middle Initial)
CHRISTINE K MINER

Mailing Address 25264 MCINTYRE SQUARE

City State Zip Code
SOUTH RIDING VA 20152

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.43

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164032

Amount of Each Receipt this Period
22.68

SUBTOTAL of Receipts This Page (optional)	▶	63.52
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 169 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. CHRISTINE K MINER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 25264 MCINTYRE SQUARE		Transaction ID: A2006-1357940
City SOUTH RIDING	State VA	Zip Code 20152
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.68
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 379.11	

Full Name (Last, First, Middle Initial) B. APRIL A MINKUS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1132 GREENTREE ST.		Transaction ID: A2006-1164162
City DEERFIELD	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.66
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.11	

Full Name (Last, First, Middle Initial) C. APRIL A MINKUS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1132 GREENTREE ST.		Transaction ID: A2006-1358071
City DEERFIELD	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.66
Name of Employer Allstate Insurance Company	Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.77	

SUBTOTAL of Receipts This Page (optional) ▶	52.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 / 314
	<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)
NEIL J MINNICH

Mailing Address 405 N. WABASH AVE. UNIT 4210

City State Zip Code
CHICAGO IL 60611

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

Name of Employer Allstate Insurance Company Occupation Underwriting Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 631.18

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163911

Amount of Each Receipt this Period
39.63

B. Full Name (Last, First, Middle Initial)
NEIL J MINNICH

Mailing Address 405 N. WABASH AVE. UNIT 4210

City State Zip Code
CHICAGO IL 60611

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

Name of Employer Allstate Insurance Company Occupation Underwriting Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 670.81

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357814

Amount of Each Receipt this Period
39.63

C. Full Name (Last, First, Middle Initial)
ALLISON MISQUEZ

Mailing Address 4449 ORIOLE CT

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation Territory Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 203.64

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164336

Amount of Each Receipt this Period
12.99

SUBTOTAL of Receipts This Page (optional)	▶	92.25
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ALLISON MISQUEZ		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 4449 ORIOLE CT		Transaction ID: A2006-1358254
City GURNEE	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.99
Name of Employer Allstate Insurance Company	Occupation Territory Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.63	

Full Name (Last, First, Middle Initial) B. LAWRENCE P MOEWS		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 740 W. JENNIFER CT.		Transaction ID: A2006-1164108
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.65
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 ▼ 705.09	

Full Name (Last, First, Middle Initial) C. LAWRENCE P MOEWS		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 740 W. JENNIFER CT.		Transaction ID: A2006-1358017
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.65
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 ▼ 752.74	

SUBTOTAL of Receipts This Page (optional)	▶	108.29
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MARCIE E MOLEK		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 400 KEVIN LANE		Transaction ID: A2006-1164123	
City GRAYSLAKE	State IL	Zip Code 60030	Amount of Each Receipt this Period 19.95
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.81		

Full Name (Last, First, Middle Initial) B. MARCIE E MOLEK		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 400 KEVIN LANE		Transaction ID: A2006-1358032	
City GRAYSLAKE	State IL	Zip Code 60030	Amount of Each Receipt this Period 21.15
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Human Resource Ivanta		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.96		

Full Name (Last, First, Middle Initial) C. SHARON L MOLLER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 19702 88TH AVE W		Transaction ID: A2006-1164332	
City EDMONDS	State WA	Zip Code 98026	Amount of Each Receipt this Period 16.35
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.60		

SUBTOTAL of Receipts This Page (optional) ▶	57.45
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 173 / 314
	(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)
SHARON L MOLLER

Mailing Address 19702 88TH AVE W

City State Zip Code
EDMONDS WA 98026

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 ▼ 277.95

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358250

Amount of Each Receipt this Period
16.35

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

Mailing Address 131 ADELAIDE UNIT 406

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP PCCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 747.47

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163988

Amount of Each Receipt this Period
47.22

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

Mailing Address 131 ADELAIDE UNIT 406

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Allstate Insurance Company Occupation AVP PCCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 794.69

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357894

Amount of Each Receipt this Period
47.22

SUBTOTAL of Receipts This Page (optional)	110.79
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 174 / 314
	(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

Full Name (Last, First, Middle Initial) A. KAREN S MORRIS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 27707 LA VISTA DRIVE		Transaction ID: A2006-1164204	
City State Zip Code MUNDELEIN IL 60060		Amount of Each Receipt this Period 38.09	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 599.84	

Full Name (Last, First, Middle Initial) B. KAREN S MORRIS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 27707 LA VISTA DRIVE		Transaction ID: A2006-1358114	
City State Zip Code MUNDELEIN IL 60060		Amount of Each Receipt this Period 38.09	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 637.93	

Full Name (Last, First, Middle Initial) C. J R MOSELEY III		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1808 N CASCADE DRIVE		Transaction ID: A2006-1357918	
City State Zip Code VERNON HILLS IL 60061		Amount of Each Receipt this Period 12.29	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Human Resource Senior Man	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 206.48	

SUBTOTAL of Receipts This Page (optional) ▶	88.47
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LARRY E MOSER		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006	
Mailing Address 611 W. BURNING TREE LANE		Transaction ID: A2006-1164115	
City State Zip Code ARLINGTON HTS IL 60004		Amount of Each Receipt this Period 28.27	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Sales Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 448.22	

Full Name (Last, First, Middle Initial) B. LARRY E MOSER		Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2006	
Mailing Address 611 W. BURNING TREE LANE		Transaction ID: A2006-1358024	
City State Zip Code ARLINGTON HTS IL 60004		Amount of Each Receipt this Period 28.27	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Sales Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 476.49	

Full Name (Last, First, Middle Initial) C. MEGHAN O MULVIHILL		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006	
Mailing Address 2445 CHERRY LANE		Transaction ID: A2006-1163995	
City State Zip Code NORTHBROOK IL 60062		Amount of Each Receipt this Period 27.92	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Associate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.72	

SUBTOTAL of Receipts This Page (optional) ▶	84.46
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 176 / 314
	(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

Full Name (Last, First, Middle Initial) A. MICHAEL F MULVIHILL		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 2445 CHERRY LANE		Transaction ID: A2006-1164101	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 35.26
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 557.36		

Full Name (Last, First, Middle Initial) B. MEGHAN O MULVIHILL		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 2445 CHERRY LANE		Transaction ID: A2006-1357901	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 27.92
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Associate Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.64		

Full Name (Last, First, Middle Initial) C. MICHAEL F MULVIHILL		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 2445 CHERRY LANE		Transaction ID: A2006-1358009	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 35.26
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 592.62		

SUBTOTAL of Receipts This Page (optional) ▶	98.44
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 314
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<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

Full Name (Last, First, Middle Initial) A. ELADIO R MUNIZ		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 11127 SPYGLASS HILL LANE		Transaction ID: A2006-1163964
City State Zip Code ALBUQUERQUE NM 87111	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.45	

Full Name (Last, First, Middle Initial) B. ELADIO R MUNIZ		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 11127 SPYGLASS HILL LANE		Transaction ID: A2006-1357869
City State Zip Code ALBUQUERQUE NM 87111	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.80	

Full Name (Last, First, Middle Initial) C. MICHAEL A MURPHY		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 233 WOOD CREEK ROAD		Transaction ID: A2006-1164289
City State Zip Code WHEELING IL 60090	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 39.76
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 ▼ 628.11	

SUBTOTAL of Receipts This Page (optional)	72.46
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL A MURPHY		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 233 WOOD CREEK ROAD		Transaction ID: A2006-1358206	
City State Zip Code WHEELING IL 60090	Amount of Each Receipt this Period 39.76		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 667.87		

Full Name (Last, First, Middle Initial) B. LINDA MYERS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 2333 CENTRAL ST #101		Transaction ID: A2006-1164277	
City State Zip Code EVANSTON IL 60201	Amount of Each Receipt this Period 15.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Tax Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.78		

Full Name (Last, First, Middle Initial) C. LINDA MYERS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 2333 CENTRAL ST #101		Transaction ID: A2006-1358194	
City State Zip Code EVANSTON IL 60201	Amount of Each Receipt this Period 15.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Tax Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.01		

SUBTOTAL of Receipts This Page (optional) ▶	70.22
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 179 / 314
	(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

Full Name (Last, First, Middle Initial) A. DAVID G NADIG		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 2950 LAKE PLACID		Transaction ID: A2006-1164223	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 46.23
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 722.67		

Full Name (Last, First, Middle Initial) B. DAVID G NADIG		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 2950 LAKE PLACID		Transaction ID: A2006-1358133	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 46.23
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 768.90		

Full Name (Last, First, Middle Initial) C. BRIAN J NAGEL		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1211 AIMTREE		Transaction ID: A2006-1164131	
City SCHAUMBURG	State IL	Zip Code 60194	Amount of Each Receipt this Period 35.95
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 566.65		

SUBTOTAL of Receipts This Page (optional) ▶	128.41
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BRIAN J NAGEL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1211 AIMTREE		Transaction ID: A2006-1358039	
City SCHAUMBURG	State IL	Zip Code 60194	Amount of Each Receipt this Period 35.95
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 602.60		

Full Name (Last, First, Middle Initial) B. JOAN M NAUGHTON-GERDES		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 650 MALIBOU		Transaction ID: A2006-1164202	
City PALATINE	State IL	Zip Code 60074	Amount of Each Receipt this Period 19.26
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.56		

Full Name (Last, First, Middle Initial) C. JOAN M NAUGHTON-GERDES		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 650 MALIBOU		Transaction ID: A2006-1358112	
City PALATINE	State IL	Zip Code 60074	Amount of Each Receipt this Period 19.26
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.82		

SUBTOTAL of Receipts This Page (optional) ▶	74.47
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DANIEL C NECASTRO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 22622 N. LINDEN DR		Transaction ID: A2006-1164086
City State Zip Code BARRINGTON IL 60010	Amount of Each Receipt this Period 104.62	
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 ▼ 1646.97	

Full Name (Last, First, Middle Initial) B. DANIEL C NECASTRO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 22622 N. LINDEN DR		Transaction ID: A2006-1357994
City State Zip Code BARRINGTON IL 60010	Amount of Each Receipt this Period 104.62	
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 ▼ 1751.59	

Full Name (Last, First, Middle Initial) C. JEANNIE M NEWMAN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 9969 LONGVIEW DRIVE		Transaction ID: A2006-1164317
City State Zip Code LITTLETON CO 80124	Amount of Each Receipt this Period 17.91	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.56	

SUBTOTAL of Receipts This Page (optional) ▶	227.15
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JEANNIE M NEWMAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 9969 LONGVIEW DRIVE		Transaction ID: A2006-1358235	
City State Zip Code LITTLETON CO 80124		Amount of Each Receipt this Period 17.91	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company Occupation Territorial Distribution			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 304.47	

Full Name (Last, First, Middle Initial) B. PATRICK K NOLL		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 22451 THORNBURY CT		Transaction ID: A2006-1164290	
City State Zip Code DEER PARK IL 60010		Amount of Each Receipt this Period 21.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 342.51	

Full Name (Last, First, Middle Initial) C. PATRICK K NOLL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 22451 THORNBURY CT		Transaction ID: A2006-1358207	
City State Zip Code DEER PARK IL 60010		Amount of Each Receipt this Period 21.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 364.28	

SUBTOTAL of Receipts This Page (optional) ▶	61.45
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. THOMAS R NORTON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1423 PIONEER COURT		Transaction ID: A2006-1164216	
City State Zip Code WAUKEGAN IL 60085	Amount of Each Receipt this Period 14.08		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Senior Man		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.28		

Full Name (Last, First, Middle Initial) B. JO B NORTON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 611 WESTBROOK DRIVE		Transaction ID: A2006-1164281	
City State Zip Code AUSTIN TX 78746	Amount of Each Receipt this Period 24.60		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.45		

Full Name (Last, First, Middle Initial) C. THOMAS R NORTON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1423 PIONEER COURT		Transaction ID: A2006-1358126	
City State Zip Code WAUKEGAN IL 60085	Amount of Each Receipt this Period 14.08		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Senior Man		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.36		

SUBTOTAL of Receipts This Page (optional) ▶	52.76
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 / 314
	<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)
JO B NORTON

Mailing Address 611 WESTBROOK DRIVE

City State Zip Code
AUSTIN TX 78746

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 ▼ 414.05

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358198

Amount of Each Receipt this Period
24.60

B. Full Name (Last, First, Middle Initial)
RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.52

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164078

Amount of Each Receipt this Period
17.72

C. Full Name (Last, First, Middle Initial)
RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code
LAKE ZURICH IL 60047

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

Name of Employer Allstate Insurance Company Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 298.24

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357986

Amount of Each Receipt this Period
17.72

SUBTOTAL of Receipts This Page (optional)	▶	60.04
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BRIAN M O'DELL		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006	
Mailing Address 3434 WHITE ADMIRAL COURT		Transaction ID: A2006-1164000	
City EDGEWATER	State MD	Zip Code 21037	Amount of Each Receipt this Period 31.32
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.12		

Full Name (Last, First, Middle Initial) B. BRIAN M O'DELL		Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2006	
Mailing Address 3434 WHITE ADMIRAL COURT		Transaction ID: A2006-1357906	
City EDGEWATER	State MD	Zip Code 21037	Amount of Each Receipt this Period 31.32
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 532.44		

Full Name (Last, First, Middle Initial) C. JOHN O'MALLEY		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006	
Mailing Address 1816 ASPEN LANE		Transaction ID: A2006-1164194	
City MOUNT PROSPECT	State IL	Zip Code 60056	Amount of Each Receipt this Period 16.07
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Human Resource Senior Man		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.32		

SUBTOTAL of Receipts This Page (optional) ▶	78.71
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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 O'MALLEY

Mailing Address 1816 ASPEN LANE

City State Zip Code
MOUNT PROSPECT IL 60056

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

Name of Employer Allstate Insurance Company Occupation Human Resource Senior Man

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.39

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358103

Amount of Each Receipt this Period
16.07

B. 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 Agency Consulting Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 387.89

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163948

Amount of Each Receipt this Period
24.54

C. 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 Agency Consulting Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 412.43

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357850

Amount of Each Receipt this Period
24.54

SUBTOTAL of Receipts This Page (optional)	▶	65.15
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 / 314
	<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)
EDWARD J OBERLE

Mailing Address 4 WHITE CHAPEL CT

City State Zip Code
ALGONQUIN IL 60102

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 ▼ 250.72

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163908

Amount of Each Receipt this Period
15.67

B. Full Name (Last, First, Middle Initial)
EDWARD J OBERLE

Mailing Address 4 WHITE CHAPEL CT

City State Zip Code
ALGONQUIN IL 60102

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 ▼ 266.39

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357811

Amount of Each Receipt this Period
15.67

C. Full Name (Last, First, Middle Initial)
ROGER D ODLE II

Mailing Address 5170 BARCROFT DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60010

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

Name of Employer Allstate Insurance Company Occupation Senior State Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 458.76

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164191

Amount of Each Receipt this Period
29.51

SUBTOTAL of Receipts This Page (optional) ▶ **60.85**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROGER D ODLE II		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 5170 BARCROFT DRIVE		Transaction ID: A2006-1358100	
City State Zip Code HOFFMAN ESTATES IL 60010		Amount of Each Receipt this Period 29.51	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 488.27	

Full Name (Last, First, Middle Initial) B. KATHY A OLCESE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 35 YORK ST		Transaction ID: A2006-1164068	
City State Zip Code HUDSON OH 44236		Amount of Each Receipt this Period 22.20	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Risk Management Busin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 349.18	

Full Name (Last, First, Middle Initial) C. KATHY A OLCESE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 35 YORK ST		Transaction ID: A2006-1357975	
City State Zip Code HUDSON OH 44236		Amount of Each Receipt this Period 22.20	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Risk Management Busin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 371.38	

SUBTOTAL of Receipts This Page (optional) ▶	73.91
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 / 314
	<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)
CRAIG A OLDHAM

Mailing Address 2606 N Paulina ST

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.70

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164259

Amount of Each Receipt this Period
32.40

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

Mailing Address 2606 N Paulina ST

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Allstate Insurance Company Occupation Marketing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 543.10

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358174

Amount of Each Receipt this Period
32.40

C. Full Name (Last, First, Middle Initial)
AL W OLSSON JR

Mailing Address 1524 BONHAM CT

City State Zip Code
IRVING TX 75038

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

Name of Employer Allstate Insurance Company Occupation AVP Data Center

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 892.49

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163913

Amount of Each Receipt this Period
56.38

SUBTOTAL of Receipts This Page (optional)	▶	121.18
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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

Mailing Address 1224 ST. WILLIAM

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Vice President Procuremen

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 960.94

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164278

Amount of Each Receipt this Period
60.96

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

Mailing Address 1224 ST. WILLIAM

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation Vice President Procuremen

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1021.90

Date of Receipt
08 / 18 / 2006

Transaction ID: A2006-1358195

Amount of Each Receipt this Period
60.96

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

Mailing Address 9352 ANSLEY LANE

City State Zip Code
BRENTWOOD TN 37027

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

Name of Employer Allstate Insurance Company Occupation Claims Field Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 545.03

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164039

Amount of Each Receipt this Period
34.58

SUBTOTAL of Receipts This Page (optional)	▶	156.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 191 / 314
	(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

Full Name (Last, First, Middle Initial) A. PAMELA J OVERTON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 9352 ANSLEY LANE		Transaction ID: A2006-1357947	
City BRENTWOOD	State TN	Zip Code 37027	Amount of Each Receipt this Period 34.58
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Field Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 579.61		

Full Name (Last, First, Middle Initial) B. GEORGE H OXENDINE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1 SOUTH HIGHLAND AVENUE #603		Transaction ID: A2006-1164016	
City ARLINGTON HEIGHTS	State IL	Zip Code 60005	Amount of Each Receipt this Period 25.94
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 408.74		

Full Name (Last, First, Middle Initial) C. GEORGE H OXENDINE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1 SOUTH HIGHLAND AVENUE #603		Transaction ID: A2006-1357922	
City ARLINGTON HEIGHTS	State IL	Zip Code 60005	Amount of Each Receipt this Period 25.94
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 434.68		

SUBTOTAL of Receipts This Page (optional) ▶	86.46
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ALAN D PAGE		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 13530 LUCKY LAKE DRIVE		Transaction ID: A2006-1164347
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer Allstate Insurance Company	Occupation VP-Agency Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 552.71	

Full Name (Last, First, Middle Initial) B. ALAN D PAGE		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 13530 LUCKY LAKE DRIVE		Transaction ID: A2006-1358265
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer Allstate Insurance Company	Occupation VP-Agency Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 587.33	

Full Name (Last, First, Middle Initial) C. DEAN T PAPPAS		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 3406 VICEROY COURT		Transaction ID: A2006-1163990
City EDGEWATER	State MD	Zip Code 21037
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.25
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 ▼ 620.45	

SUBTOTAL of Receipts This Page (optional)	▶	108.49
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DEAN T PAPPAS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 3406 VICEROY COURT		Transaction ID: A2006-1357896	
City State Zip Code EDGEWATER MD 21037	Amount of Each Receipt this Period 39.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 659.70		

Full Name (Last, First, Middle Initial) B. ROBERT L PARK		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1107 BONITA DRIVE		Transaction ID: A2006-1164192	
City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 50.98		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Public Relations Mana		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 805.32		

Full Name (Last, First, Middle Initial) C. ROBERT L PARK		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1107 BONITA DRIVE		Transaction ID: A2006-1358101	
City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 50.98		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Public Relations Mana		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 856.30		

SUBTOTAL of Receipts This Page (optional) ▶	141.21
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROGER D PARKER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1305 N MAIDSTONE		Transaction ID: A2006-1164341
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 46.17	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Corporate Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 726.26	

Full Name (Last, First, Middle Initial) B. ROGER D PARKER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1305 N MAIDSTONE		Transaction ID: A2006-1358259
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 46.17	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Corporate Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 772.43	

Full Name (Last, First, Middle Initial) C. MAYUR M PATEL		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 742 E PARKVIEW CT		Transaction ID: A2006-1164133
City State Zip Code ROSELLE IL 60172	Amount of Each Receipt this Period 28.89	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 457.14	

SUBTOTAL of Receipts This Page (optional) ▶	121.23
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MAYUR M PATEL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 742 E PARKVIEW CT		Transaction ID: A2006-1358041	
City ROSELLE	State IL	Zip Code 60172	Amount of Each Receipt this Period 28.89
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 486.03		

Full Name (Last, First, Middle Initial) B. BARRY S PAUL		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 3010 LILAC LANE		Transaction ID: A2006-1163970	
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Receipt this Period 31.44
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP & Assistant Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 469.74		

Full Name (Last, First, Middle Initial) C. CHARLES PAUL		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 301 CAMELOT LANE		Transaction ID: A2006-1163975	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 66.19
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Stra		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1036.99		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BARRY S PAUL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 3010 LILAC LANE		Transaction ID: A2006-1357876
City NORTHBROOK State IL Zip Code 60062	Amount of Each Receipt this Period 31.44	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation AVP & Assistant Treasurer	Aggregate Year-to-Date ▼ 501.18	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. CHARLES PAUL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 301 CAMELOT LANE		Transaction ID: A2006-1357881
City LIBERTYVILLE State IL Zip Code 60048	Amount of Each Receipt this Period 66.19	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Stra	Aggregate Year-to-Date ▼ 1103.18	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RONALD J PEPPING		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 934 LEWIS PLACE		Transaction ID: A2006-1164169
City GENEVA State IL Zip Code 60134	Amount of Each Receipt this Period 28.43	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company Occupation Ivantage Financial Manage	Aggregate Year-to-Date ▼ 451.13	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	126.06
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RONALD J PEPPING		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 934 LEWIS PLACE		Transaction ID: A2006-1358078	
City State Zip Code GENEVA IL 60134	Amount of Each Receipt this Period 28.43		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Ivantage Financial Manage		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 479.56		

Full Name (Last, First, Middle Initial) B. FLORIE S PERELLIS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1480 MINTHAVEN RD		Transaction ID: A2006-1163937	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 45.69		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 718.16		

Full Name (Last, First, Middle Initial) C. FLORIE S PERELLIS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1480 MINTHAVEN RD		Transaction ID: A2006-1357839	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 45.69		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 763.85		

SUBTOTAL of Receipts This Page (optional) ▶	119.81
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. NANCY A PERRY		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 3575 CALDERWOOD DR		Transaction ID: A2006-1164190	
City State Zip Code ROCKFORD IL 61114		Amount of Each Receipt this Period 16.65	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.45	

Full Name (Last, First, Middle Initial) B. NANCY A PERRY		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 3575 CALDERWOOD DR		Transaction ID: A2006-1358099	
City State Zip Code ROCKFORD IL 61114		Amount of Each Receipt this Period 16.65	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 279.10	

Full Name (Last, First, Middle Initial) C. JUDITH M PETRAY		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 539 KELMORE ST		Transaction ID: A2006-1163907	
City State Zip Code MOSS BEACH CA 94038		Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Managing Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 261.60	

SUBTOTAL of Receipts This Page (optional) ▶	49.65
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JUDITH M PETRAY		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 539 KELMORE ST		Transaction ID: A2006-1357810
City MOSS BEACH	State CA	Zip Code 94038
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer Allstate Insurance Company	Occupation Managing Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.95	

Full Name (Last, First, Middle Initial) B. STEVEN A PETTI		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 580 SALCEDA DR		Transaction ID: A2006-1163936
City MUNDELEIN	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.19
Name of Employer Allstate Insurance Company	Occupation AVP Property & Casualty F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 746.57	

Full Name (Last, First, Middle Initial) C. STEVEN A PETTI		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 580 SALCEDA DR		Transaction ID: A2006-1357838
City MUNDELEIN	State IL	Zip Code 60060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.19
Name of Employer Allstate Insurance Company	Occupation AVP Property & Casualty F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 793.76	

SUBTOTAL of Receipts This Page (optional)	110.73
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 200 / 314
	(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)
TIMOTHY H PLOHG

Mailing Address 2304 Cedar Elm Terrace

City State Zip Code
Westlake TX 76262

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 ▼ 202.22

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164061

Amount of Each Receipt this Period
12.91

B. Full Name (Last, First, Middle Initial)
TIMOTHY H PLOHG

Mailing Address 2304 Cedar Elm Terrace

City State Zip Code
Westlake TX 76262

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 ▼ 215.13

Date of Receipt
08 / 18 / 2006

Transaction ID: A2006-1357968

Amount of Each Receipt this Period
12.91

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

Mailing Address 1651 TIMBER WOODS LANE

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Allstate Insurance Company Occupation GVP-AGENCY & CUSTOMER SUP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1143.81

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164229

Amount of Each Receipt this Period
72.70

SUBTOTAL of Receipts This Page (optional) ► 98.52

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES M PLOTTS		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 1651 TIMBER WOODS LANE		Transaction ID: A2006-1358139
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 72.70
Name of Employer Allstate Insurance Company	Occupation GVP-AGENCY & CUSTOMER SUP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1216.51	

Full Name (Last, First, Middle Initial) B. DAVID J PRENDERGAST		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 2816 HAVEN LANE		Transaction ID: A2006-1163928
City LINDENHURST	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.25
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.60	

Full Name (Last, First, Middle Initial) C. DAVID J PRENDERGAST		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 2816 HAVEN LANE		Transaction ID: A2006-1357830
City LINDENHURST	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.25
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.85	

SUBTOTAL of Receipts This Page (optional)	143.20
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 / 314
	<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)
MARTIN PRZYGODA

Mailing Address 17516 KATIE 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 Finance and Planning

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.20

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164097

Amount of Each Receipt this Period
26.78

B. Full Name (Last, First, Middle Initial)
MARTIN PRZYGODA

Mailing Address 17516 KATIE 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 Finance and Planning

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 447.98

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358005

Amount of Each Receipt this Period
26.78

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 Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.63

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164220

Amount of Each Receipt this Period
20.38

SUBTOTAL of Receipts This Page (optional)	▶	73.94
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 314
	(check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. THOMAS G PURTELL		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 22663 CHESHIRE COURT		Transaction ID: A2006-1358130	
City State Zip Code DEER PARK IL 60010	Amount of Each Receipt this Period 20.38		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.01		

Full Name (Last, First, Middle Initial) B. JORGE A QUEZADA		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1407 W. GROVE ST		Transaction ID: A2006-1164355	
City State Zip Code ARLINGTON HGTS IL 60005	Amount of Each Receipt this Period 26.74		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Product Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 422.69		

Full Name (Last, First, Middle Initial) C. JORGE A QUEZADA		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1407 W. GROVE ST		Transaction ID: A2006-1358273	
City State Zip Code ARLINGTON HGTS IL 60005	Amount of Each Receipt this Period 26.74		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Product Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.43		

SUBTOTAL of Receipts This Page (optional) ▶	73.86
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 204 / 314
	(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

Full Name (Last, First, Middle Initial) A. JOSEPH P RATH		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 359 STAFFORD COURT		Transaction ID: A2006-1164052
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.32
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 852.95	

Full Name (Last, First, Middle Initial) B. JOSEPH P RATH		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 359 STAFFORD COURT		Transaction ID: A2006-1357960
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.32
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 907.27	

Full Name (Last, First, Middle Initial) C. JOHN B REARDON		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 441 KELLY LANE		Transaction ID: A2006-1163914
City CRYSTAL LAKE	State IL	Zip Code 60012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.15
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 610.40	

SUBTOTAL of Receipts This Page (optional)	▶	146.79
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 205 / 314
	(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

Full Name (Last, First, Middle Initial) A. JOHN B REARDON		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 441 KELLY LANE		Transaction ID: A2006-1357816
City CRYSTAL LAKE	State IL	Zip Code 60012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.15
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 648.55	

Full Name (Last, First, Middle Initial) B. JOSEPH J RICHARDSON		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1411 PARSONS LANE		Transaction ID: A2006-1163979
City LOWER GWYNEDD	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.70
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 ▼ 970.61	

Full Name (Last, First, Middle Initial) C. JOSEPH J RICHARDSON		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 1411 PARSONS LANE		Transaction ID: A2006-1357885
City LOWER GWYNEDD	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.70
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 ▼ 1032.31	

SUBTOTAL of Receipts This Page (optional)	▶	161.55
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 206 / 314 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
--	--

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBIN R RICHMOND Mailing Address 9 HAWTHORN GROVE CIRCLE <hr/> City State Zip Code HAWTHORN WOODS IL 60047 <hr/> FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006 <hr/> Transaction ID: A2006-1164212 Amount of Each Receipt this Period 24.68
Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser <hr/> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.28

Full Name (Last, First, Middle Initial) B. ROBIN R RICHMOND Mailing Address 9 HAWTHORN GROVE CIRCLE <hr/> City State Zip Code HAWTHORN WOODS IL 60047 <hr/> FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006 <hr/> Transaction ID: A2006-1358122 Amount of Each Receipt this Period 24.68
Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser <hr/> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 413.96

Full Name (Last, First, Middle Initial) C. ANDREW T RIEDER Mailing Address 7 ONEIDA LANE <hr/> City State Zip Code HAWTHORN WOODS IL 60047 <hr/> FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006 <hr/> Transaction ID: A2006-1163984 Amount of Each Receipt this Period 45.35
Name of Employer Allstate Insurance Company Occupation AVP Homeowner Initiative <hr/> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 716.36

SUBTOTAL of Receipts This Page (optional) ▶	94.71
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANDREW T RIEDER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 7 ONEIDA LANE		Transaction ID: A2006-1357890	
City State Zip Code HAWTHORN WOODS IL 60047		Amount of Each Receipt this Period 45.35	
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 ▼ 761.71	

Full Name (Last, First, Middle Initial) B. JESSICA D RIVERA		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2055 LOCKRIDGE PLACE		Transaction ID: A2006-1164352	
City State Zip Code EL DORADO HILLS CA 95762		Amount of Each Receipt this Period 45.25	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company Occupation AVP Corporate Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 713.29	

Full Name (Last, First, Middle Initial) C. JESSICA D RIVERA		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2055 LOCKRIDGE PLACE		Transaction ID: A2006-1358270	
City State Zip Code EL DORADO HILLS CA 95762		Amount of Each Receipt this Period 45.25	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company Occupation AVP Corporate Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 758.54	

SUBTOTAL of Receipts This Page (optional) ▶	135.85
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 208 / 314
	(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

Full Name (Last, First, Middle Initial) A. MARIO RIZZO		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 5926 W. 90TH PLACE		Transaction ID: A2006-1164147	
City State Zip Code OAK LAWN IL 60453		Amount of Each Receipt this Period 38.30	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Property & Casualty F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 599.43	

Full Name (Last, First, Middle Initial) B. MARIO RIZZO		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 5926 W. 90TH PLACE		Transaction ID: A2006-1358055	
City State Zip Code OAK LAWN IL 60453		Amount of Each Receipt this Period 38.30	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Property & Casualty F	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 637.73	

Full Name (Last, First, Middle Initial) C. DANIEL P ROBERTS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 4374 W Anderson Rd		Transaction ID: A2006-1163972	
City State Zip Code South Euclid OH 44121		Amount of Each Receipt this Period 20.25	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.10	

SUBTOTAL of Receipts This Page (optional) ▶	96.85
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 209 / 314
	(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

Full Name (Last, First, Middle Initial) A. CLAY F ROBERTS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 3075 Sanders Road Suite G2E		Transaction ID: A2006-1164342	
City State Zip Code Northbrook IL 60062	Amount of Each Receipt this Period 32.70		
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 ▼ 522.55		

Full Name (Last, First, Middle Initial) B. DANIEL P ROBERTS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 4374 W Anderson Rd		Transaction ID: A2006-1357878	
City State Zip Code South Euclid OH 44121	Amount of Each Receipt this Period 20.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.35		

Full Name (Last, First, Middle Initial) C. CLAY F ROBERTS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 3075 Sanders Road Suite G2E		Transaction ID: A2006-1358260	
City State Zip Code Northbrook IL 60062	Amount of Each Receipt this Period 32.70		
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 ▼ 555.25		

SUBTOTAL of Receipts This Page (optional) ▶	85.65
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 / 314
	<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)
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 ▼ 688.01

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164081

Amount of Each Receipt this Period
39.77

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 ▼ 727.78

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357989

Amount of Each Receipt this Period
39.77

C. Full Name (Last, First, Middle Initial)
DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City State Zip Code
HINSDALE IL 60521

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

Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Fiel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 398.33

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164156

Amount of Each Receipt this Period
25.95

SUBTOTAL of Receipts This Page (optional)	▶	105.49
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 211 / 314
	(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

Full Name (Last, First, Middle Initial) A. DONNA J ROSEMEYER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 810 S THURLOW STREET		Transaction ID: A2006-1358064	
City State Zip Code HINSDALE IL 60521	Amount of Each Receipt this Period 25.95		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President PCCSO Fiel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 424.28		

Full Name (Last, First, Middle Initial) B. JACQUELINE A ROTHE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 4763 WELLINGTON DRIVE		Transaction ID: A2006-1164349	
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 16.27		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.77		

Full Name (Last, First, Middle Initial) C. JACQUELINE A ROTHE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 4763 WELLINGTON DRIVE		Transaction ID: A2006-1358267	
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 16.27		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.04		

SUBTOTAL of Receipts This Page (optional) ▶	58.49
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 / 314
	<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)
DONALD L RUDD

Mailing Address 25 CRESTVIEW TERRACE

City State Zip Code
BUFFALO GROVE IL 60089

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 ▼ 211.97

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164297

Amount of Each Receipt this Period
13.37

B. Full Name (Last, First, Middle Initial)
DONALD L RUDD

Mailing Address 25 CRESTVIEW TERRACE

City State Zip Code
BUFFALO GROVE IL 60089

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 ▼ 225.34

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358214

Amount of Each Receipt this Period
13.37

C. Full Name (Last, First, Middle Initial)
GEORGE E RUEBENSON

Mailing Address 29 FOX TR

City State Zip Code
LINCOLNSHIRE IL 60069

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

Name of Employer Allstate Insurance Company Occupation SVP-P-CCSO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1418.01

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164208

Amount of Each Receipt this Period
91.15

SUBTOTAL of Receipts This Page (optional) ► 117.89

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 213 / 314
	(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

Full Name (Last, First, Middle Initial) A. GEORGE E RUEBENSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 29 FOX TR		Transaction ID: A2006-1358118	
City LINCOLNSHIRE	State IL	Zip Code 60069	Amount of Each Receipt this Period 91.15
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP-P-CCSO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1509.16		

Full Name (Last, First, Middle Initial) B. DOREEN M RYAN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 17 ALSTON COURT		Transaction ID: A2006-1163965	
City RED BANK	State NJ	Zip Code 07701	Amount of Each Receipt this Period 21.80
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Managing Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.80		

Full Name (Last, First, Middle Initial) C. DOREEN M RYAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 17 ALSTON COURT		Transaction ID: A2006-1357870	
City RED BANK	State NJ	Zip Code 07701	Amount of Each Receipt this Period 21.80
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Managing Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.60		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 / 314		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAUL R RYSKE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 898 E. LONGWOOD DR.		Transaction ID: A2006-1164079	
City State Zip Code LAKE FOREST IL 60045		Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.62	

Full Name (Last, First, Middle Initial) B. PAUL R RYSKE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 898 E. LONGWOOD DR.		Transaction ID: A2006-1357987	
City State Zip Code LAKE FOREST IL 60045		Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.50	

Full Name (Last, First, Middle Initial) C. MICHAEL A SCARDINA		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 51 SOUTH ROYAL OAK		Transaction ID: A2006-1164054	
City State Zip Code VERNON HILLS IL 60061		Amount of Each Receipt this Period 27.73	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Asset Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 411.09	

SUBTOTAL of Receipts This Page (optional) ▶	67.49
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL A SCARDINA		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 51 SOUTH ROYAL OAK		Transaction ID: A2006-1357962	
City VERNON HILLS	State IL	Amount of Each Receipt this Period 27.73	
Zip Code 60061		Amount of Each Receipt this Period 27.73	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Asset Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.82		

Full Name (Last, First, Middle Initial) B. PATRICK J SCHNEIDER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 210 NORTH TRAIL		Transaction ID: A2006-1164195	
City HAWTHORN WOODS	State IL	Amount of Each Receipt this Period 27.66	
Zip Code 60047		Amount of Each Receipt this Period 27.66	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.91		

Full Name (Last, First, Middle Initial) C. PATRICK J SCHNEIDER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 210 NORTH TRAIL		Transaction ID: A2006-1358104	
City HAWTHORN WOODS	State IL	Amount of Each Receipt this Period 27.66	
Zip Code 60047		Amount of Each Receipt this Period 27.66	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.57		

SUBTOTAL of Receipts This Page (optional) ▶	83.05
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 216 / 314
	(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

Full Name (Last, First, Middle Initial) A. STEPHEN E SCHOLL		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 7 COPPERFIELD DRIVE		Transaction ID: A2006-1163968
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 47.97	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP HR Shared Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 748.55	

Full Name (Last, First, Middle Initial) B. STEPHEN E SCHOLL		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 7 COPPERFIELD DRIVE		Transaction ID: A2006-1357873
City State Zip Code HAWTHORN WOODS IL 60047	Amount of Each Receipt this Period 47.97	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP HR Shared Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 796.52	

Full Name (Last, First, Middle Initial) C. DALE J SCHUELLER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 2941 GLENARYE DRIVE		Transaction ID: A2006-1164295
City State Zip Code LINDENHURST IL 60046	Amount of Each Receipt this Period 15.16	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Field Administration Dire	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.96	

SUBTOTAL of Receipts This Page (optional) ▶	111.10
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 217 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DALE J SCHUELLER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2941 GLENARYE DRIVE		Transaction ID: A2006-1358212	
City State Zip Code LINDENHURST IL 60046	Amount of Each Receipt this Period 15.16		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Administration Dire		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.12		

Full Name (Last, First, Middle Initial) B. DAVID I SCHUR		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1216 SANDHURST DRIVE		Transaction ID: A2006-1164128	
City State Zip Code BUFFALO GROVE IL 60089	Amount of Each Receipt this Period 22.15		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.34		

Full Name (Last, First, Middle Initial) C. DAVID I SCHUR		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1216 SANDHURST DRIVE		Transaction ID: A2006-1358036	
City State Zip Code BUFFALO GROVE IL 60089	Amount of Each Receipt this Period 22.15		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 362.49		

SUBTOTAL of Receipts This Page (optional) ▶	59.46
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL D SCHUSTER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 526 LANGE COURT		Transaction ID: A2006-1164328	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 15.76
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.06		

Full Name (Last, First, Middle Initial) B. MICHAEL D SCHUSTER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 526 LANGE COURT		Transaction ID: A2006-1358246	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 15.76
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 263.82		

Full Name (Last, First, Middle Initial) C. DAVID J SCHWARTZER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1911 205TH PL NE		Transaction ID: A2006-1164250	
City SAMMAMISH	State WA	Zip Code 98074	Amount of Each Receipt this Period 38.89
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 614.33		

SUBTOTAL of Receipts This Page (optional) ▶	70.41
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 219 / 314
	<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)
DAVID J SCHWARTZER

Mailing Address 1911 205TH PL NE

City State Zip Code
SAMMAMISH WA 98074

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 ▼ 653.22

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358165

Amount of Each Receipt this Period
38.89

B. Full Name (Last, First, Middle Initial)
ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.60

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1163945

Amount of Each Receipt this Period
16.35

C. Full Name (Last, First, Middle Initial)
ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City State Zip Code
Hawthorn Woods IL 60047

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

Name of Employer Allstate Insurance Company Occupation Senior Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 277.95

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357847

Amount of Each Receipt this Period
16.35

SUBTOTAL of Receipts This Page (optional)	▶	71.59
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT M SCULLY		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 302 NORTH VILLAGE ST		Transaction ID: A2006-1163929
City State Zip Code CELEBRATION FL 34747	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Field Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.28	

Full Name (Last, First, Middle Initial) B. ROBERT M SCULLY		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 302 NORTH VILLAGE ST		Transaction ID: A2006-1357831
City State Zip Code CELEBRATION FL 34747	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Field Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.16	

Full Name (Last, First, Middle Initial) C. DANNY R SELLERS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 5903 87TH ST		Transaction ID: A2006-1164282
City State Zip Code LUBBOCK TX 79424	Amount of Each Receipt this Period 23.16	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 367.21	

SUBTOTAL of Receipts This Page (optional) ▶	62.92
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 221 / 314
	(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

Full Name (Last, First, Middle Initial) A. DANNY R SELLERS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 5903 87TH ST		Transaction ID: A2006-1358199	
City State Zip Code LUBBOCK TX 79424	Amount of Each Receipt this Period 23.16		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.37		

Full Name (Last, First, Middle Initial) B. STACY Y SHARPE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2 E. Erie #1506		Transaction ID: A2006-1164184	
City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 29.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.00		

Full Name (Last, First, Middle Initial) C. STACY Y SHARPE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2 E. Erie #1506		Transaction ID: A2006-1358093	
City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 29.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.25		

SUBTOTAL of Receipts This Page (optional) ▶	81.66
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 222 / 314
	(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

Full Name (Last, First, Middle Initial) A. STEVEN E SHEBIK		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 517 ROBINWOOD LANE		Transaction ID: A2006-1164155
City State Zip Code WHEATON IL 60187	Amount of Each Receipt this Period 76.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Property/C	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.06	

Full Name (Last, First, Middle Initial) B. STEVEN E SHEBIK		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 517 ROBINWOOD LANE		Transaction ID: A2006-1358063
City State Zip Code WHEATON IL 60187	Amount of Each Receipt this Period 76.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President Property/C	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1276.21	

Full Name (Last, First, Middle Initial) C. STEVEN R SHEFFEY		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 839 SUMAC		Transaction ID: A2006-1164074
City State Zip Code HIGHLAND PARK IL 60035	Amount of Each Receipt this Period 19.22	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.92	

SUBTOTAL of Receipts This Page (optional) ▶	171.52
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 223 / 314
	(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)
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 ▼ 322.14

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357982

Amount of Each Receipt this Period
19.22

B. Full Name (Last, First, Middle Initial)
JOHN M SHUMATE III

Mailing Address 40096 NORTH GOLDENROD LANE

City State Zip Code
WADSWORTH IL 60083

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 ▼ 220.20

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1163999

Amount of Each Receipt this Period
13.26

C. Full Name (Last, First, Middle Initial)
JOHN M SHUMATE III

Mailing Address 40096 NORTH GOLDENROD LANE

City State Zip Code
WADSWORTH IL 60083

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 ▼ 233.46

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357905

Amount of Each Receipt this Period
13.26

SUBTOTAL of Receipts This Page (optional)	▶	45.74
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 / 314
	<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)
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 ▼ 348.16

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164231

Amount of Each Receipt this Period
21.76

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 ▼ 369.92

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358142

Amount of Each Receipt this Period
21.76

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 ▼ 435.22

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1163957

Amount of Each Receipt this Period
27.47

SUBTOTAL of Receipts This Page (optional) ► 70.99

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 / 314
	<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 L SIMMONS

Mailing Address 418 DEUCE DRIVE

City WALL State NJ Zip Code 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 ▼ 462.69

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2006

Transaction ID: A2006-1357861

Amount of Each Receipt this Period
 27.47

B. Full Name (Last, First, Middle Initial)
KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City BARRINGTON State IL Zip Code 60010

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 ▼ 546.08

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2006

Transaction ID: A2006-1164310

Amount of Each Receipt this Period
 34.98

C. Full Name (Last, First, Middle Initial)
KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City BARRINGTON State IL Zip Code 60010

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 ▼ 581.06

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2006

Transaction ID: A2006-1358227

Amount of Each Receipt this Period
 34.98

SUBTOTAL of Receipts This Page (optional)	▶	97.43
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANNE E SIMPSON		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 632 ONWENTSIA AVENUE		Transaction ID: A2006-1164084	
City State Zip Code HIGHLAND PARK IL 60035	Amount of Each Receipt this Period 26.51		
FEC ID number of contributing federal political committee. C			
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 ▼ 423.56		

Full Name (Last, First, Middle Initial) B. ANNE E SIMPSON		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 632 ONWENTSIA AVENUE		Transaction ID: A2006-1357992	
City State Zip Code HIGHLAND PARK IL 60035	Amount of Each Receipt this Period 26.51		
FEC ID number of contributing federal political committee. C			
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 ▼ 450.07		

Full Name (Last, First, Middle Initial) C. JOHN G SINNICKI		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 2117 CARROLL CREEK VIEW CT		Transaction ID: A2006-1164033	
City State Zip Code FREDERICK MD 21702	Amount of Each Receipt this Period 19.37		
FEC ID number of contributing federal political committee. C			
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 ▼ 277.61		

SUBTOTAL of Receipts This Page (optional) ▶	72.39
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 / 314
	<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)
JOHN G SINNICKI

Mailing Address 2117 CARROLL CREEK VIEW CT

City State Zip Code
FREDERICK MD 21702

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 ▼ 296.98

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357941

Amount of Each Receipt this Period
19.37

B. Full Name (Last, First, Middle Initial)
DAVID N SITZ

Mailing Address 519A CHICAGO AVE.

City State Zip Code
EVANSTON IL 60202

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 ▼ 395.72

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164094

Amount of Each Receipt this Period
25.07

C. Full Name (Last, First, Middle Initial)
DAVID N SITZ

Mailing Address 519A CHICAGO AVE.

City State Zip Code
EVANSTON IL 60202

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 ▼ 420.79

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358002

Amount of Each Receipt this Period
25.07

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 228 / 314
	(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

Full Name (Last, First, Middle Initial) A. KEVIN R SLAWIN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1316 CRESTWOOD DRIVE		Transaction ID: A2006-1164193	
City NORTHBROOK	State IL	Amount of Each Receipt this Period 39.03	
Zip Code 60062		Amount of Each Receipt this Period 39.03	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.03	
Name of Employer Allstate Insurance Company	Occupation VP AF Admin Serv	Amount of Each Receipt this Period 39.03	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 617.83	Amount of Each Receipt this Period 39.03	

Full Name (Last, First, Middle Initial) B. KEVIN R SLAWIN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1316 CRESTWOOD DRIVE		Transaction ID: A2006-1358102	
City NORTHBROOK	State IL	Amount of Each Receipt this Period 39.03	
Zip Code 60062		Amount of Each Receipt this Period 39.03	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.03	
Name of Employer Allstate Insurance Company	Occupation VP AF Admin Serv	Amount of Each Receipt this Period 39.03	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 656.86	Amount of Each Receipt this Period 39.03	

Full Name (Last, First, Middle Initial) C. KIMBERLY J SLOANE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 378 N. VISTA AVE		Transaction ID: A2006-1164173	
City LOMBARD	State IL	Amount of Each Receipt this Period 36.26	
Zip Code 60148		Amount of Each Receipt this Period 36.26	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.26	
Name of Employer Allstate Insurance Company	Occupation Claim Reserve Director	Amount of Each Receipt this Period 36.26	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 573.86	Amount of Each Receipt this Period 36.26	

SUBTOTAL of Receipts This Page (optional) ▶	114.32
TOTAL This Period (last page this line number only) ▶	114.32

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 229 / 314
	(check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KIMBERLY J SLOANE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 378 N. VISTA AVE		Transaction ID: A2006-1358082	
City State Zip Code LOMBARD IL 60148	Amount of Each Receipt this Period 36.26		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Reserve Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 610.12		

Full Name (Last, First, Middle Initial) B. HUGH F SMART		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 222 N WISNER		Transaction ID: A2006-1163933	
City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 17.50		
FEC ID number of contributing federal political committee. C			
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 ▼ 278.70		

Full Name (Last, First, Middle Initial) C. HUGH F SMART		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 222 N WISNER		Transaction ID: A2006-1357835	
City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 17.50		
FEC ID number of contributing federal political committee. C			
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 ▼ 296.20		

SUBTOTAL of Receipts This Page (optional) ▶	71.26
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 / 314
	<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)
ANN M SMITH

Mailing Address 20380 STILLHOUSE BRANCH PLACE

City POTOMAC FALLS State VA Zip Code 20165

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

Name of Employer Allstate Insurance Company Occupation Distribution Support Lead

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.66

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1163916

Amount of Each Receipt this Period
13.11

B. Full Name (Last, First, Middle Initial)
BENJAMIN M SMITH

Mailing Address 1008 CHESAPEAK BLVD

City GRAYSLAKE State IL Zip Code 60030

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

Name of Employer Allstate Insurance Company Occupation Territorial Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.54

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164015

Amount of Each Receipt this Period
16.29

C. Full Name (Last, First, Middle Initial)
J E SMITH

Mailing Address 310 WHITMORE LANE

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer Allstate Insurance Company Occupation VP Distribution and Chann

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 898.17

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164158

Amount of Each Receipt this Period
57.05

SUBTOTAL of Receipts This Page (optional)	▶	86.45
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KENNETH D SMITH		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 619 N		Transaction ID: A2006-1164188	
City OAK PARK	State IL	Zip Code 60302	Amount of Each Receipt this Period 14.60
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.95		

Full Name (Last, First, Middle Initial) B. ANN M SMITH		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 20380 STILLHOUSE BRANCH PLACE		Transaction ID: A2006-1357818	
City POTOMAC FALLS	State VA	Zip Code 20165	Amount of Each Receipt this Period 13.11
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.77		

Full Name (Last, First, Middle Initial) C. BENJAMIN M SMITH		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1008 CHESAPEAK BLVD		Transaction ID: A2006-1357921	
City GRAYSLAKE	State IL	Zip Code 60030	Amount of Each Receipt this Period 16.29
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.83		

SUBTOTAL of Receipts This Page (optional) ▶	44.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. J E SMITH		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 310 WHITMORE LANE		Transaction ID: A2006-1358066	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 57.05		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation VP Distribution and Chann		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 955.22		

Full Name (Last, First, Middle Initial) B. KENNETH D SMITH		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 619 N		Transaction ID: A2006-1358097	
City State Zip Code OAK PARK IL 60302	Amount of Each Receipt this Period 14.60		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.55		

Full Name (Last, First, Middle Initial) C. RANDALL D SNITTJER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 11423 E. Blue Sky Drive		Transaction ID: A2006-1164300	
City State Zip Code Scottsdale AZ 85262	Amount of Each Receipt this Period 25.58		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 404.38		

SUBTOTAL of Receipts This Page (optional) ▶	97.23
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 / 314
	<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)
RANDALL D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City State Zip Code
Scottsdale AZ 85262

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

Name of Employer Allstate Insurance Company Occupation Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 429.96

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358217

Amount of Each Receipt this Period
25.58

B. Full Name (Last, First, Middle Initial)
ROBERT S SODERLUND

Mailing Address 53 BRIDLEPATH DRIVE

City State Zip Code
LINDENHURST IL 60046

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 ▼ 208.85

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163910

Amount of Each Receipt this Period
13.25

C. Full Name (Last, First, Middle Initial)
ROBERT S SODERLUND

Mailing Address 53 BRIDLEPATH DRIVE

City State Zip Code
LINDENHURST IL 60046

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 ▼ 222.10

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357813

Amount of Each Receipt this Period
13.25

SUBTOTAL of Receipts This Page (optional)	▶	52.08
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. STEVEN P SORENSON		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 20712 High Ridge Dr		Transaction ID: A2006-1164241
City KILDEER	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.90
Name of Employer Allstate Insurance Company	Occupation VP-Agency Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1117.53	

Full Name (Last, First, Middle Initial) B. STEVEN P SORENSON		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 20712 High Ridge Dr		Transaction ID: A2006-1358156
City KILDEER	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.90
Name of Employer Allstate Insurance Company	Occupation VP-Agency Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1188.43	

Full Name (Last, First, Middle Initial) C. KEVIN A SPATARO		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1663 SARATOGA LANE		Transaction ID: A2006-1164214
City GLENVIEW	State IL	Zip Code 60026
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.31
Name of Employer Allstate Insurance Company	Occupation AVP Account Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.57	

SUBTOTAL of Receipts This Page (optional)	▶	167.11
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KEVIN A SPATARO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 1663 SARATOGA LANE		Transaction ID: A2006-1358124
City State Zip Code GLENVIEW IL 60026	Amount of Each Receipt this Period 25.31	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Account Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 417.88	

Full Name (Last, First, Middle Initial) B. EDWIN M SPECHT		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 740 AMBRIA DRIVE		Transaction ID: A2006-1163987
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 32.98	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 522.43	

Full Name (Last, First, Middle Initial) C. EDWIN M SPECHT		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 740 AMBRIA DRIVE		Transaction ID: A2006-1357893
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 32.98	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.41	

SUBTOTAL of Receipts This Page (optional) ▶	91.27
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 / 314
	<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)
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 ▼ 410.41

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164207

Amount of Each Receipt this Period
25.90

B. 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 ▼ 436.31

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358117

Amount of Each Receipt this Period
25.90

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

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.86

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164058

Amount of Each Receipt this Period
37.99

SUBTOTAL of Receipts This Page (optional)	▶	89.79
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 237 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
GURNEE IL 60031

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

Name of Employer Allstate Insurance Company Occupation AVP Technology Shared Ser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 623.85

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357966

Amount of Each Receipt this Period
37.99

B. Full Name (Last, First, Middle Initial)
BARBARA J STEELE

Mailing Address 730 CREEKSIDE DR #504

City State Zip Code
MT PROSPECT IL 60056

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 ▼ 201.19

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358047

Amount of Each Receipt this Period
11.97

C. Full Name (Last, First, Middle Initial)
EMORY D STEPHENS JR

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

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

Name of Employer Allstate Insurance Company Occupation AVP Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.80

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164014

Amount of Each Receipt this Period
37.38

SUBTOTAL of Receipts This Page (optional)	▶	87.34
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. GARY S STERE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2015 SELVA MADERA COURT		Transaction ID: A2006-1164029	
City ATLANTIC BEACH	State FL	Zip Code 32233	Amount of Each Receipt this Period 35.78
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 566.03		

Full Name (Last, First, Middle Initial) B. GARY S STERE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2015 SELVA MADERA COURT		Transaction ID: A2006-1357937	
City ATLANTIC BEACH	State FL	Zip Code 32233	Amount of Each Receipt this Period 35.78
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 601.81		

Full Name (Last, First, Middle Initial) C. MYRON E STOUFFER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1528 JESSICA LANE		Transaction ID: A2006-1164025	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 18.81
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 <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.54		

SUBTOTAL of Receipts This Page (optional) ▶	90.37
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 240 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MYRON E STOUFFER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1528 JESSICA LANE		Transaction ID: A2006-1357932	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 18.81		
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 <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.35		

Full Name (Last, First, Middle Initial) B. CHRISTINE A SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 257 BIG TERRA LANE		Transaction ID: A2006-1163902	
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 23.87		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP PCCSO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 373.94		

Full Name (Last, First, Middle Initial) C. DANIEL J SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 4018 BERRYWOOD DRIVE		Transaction ID: A2006-1163950	
City State Zip Code SEAFORD NY 11783	Amount of Each Receipt this Period 12.79		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.49		

SUBTOTAL of Receipts This Page (optional) ▶	55.47
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KEVIN T SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 221 CARRIAGE HILL CIR		Transaction ID: A2006-1164312
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 91.08	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Vice President -Corp Ethn	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1438.73	

Full Name (Last, First, Middle Initial) B. CHRISTINE A SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 257 BIG TERRA LANE		Transaction ID: A2006-1357805
City State Zip Code GURNEE IL 60031	Amount of Each Receipt this Period 23.87	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP PCCSO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 397.81	

Full Name (Last, First, Middle Initial) C. DANIEL J SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 4018 BERRYWOOD DRIVE		Transaction ID: A2006-1357852
City State Zip Code SEAFORD NY 11783	Amount of Each Receipt this Period 12.79	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Distribution Support Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.28	

SUBTOTAL of Receipts This Page (optional) ▶	127.74
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KEVIN T SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 221 CARRIAGE HILL CIR		Transaction ID: A2006-1358230	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 91.08		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Vice President -Corp Ethn		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1529.81		

Full Name (Last, First, Middle Initial) B. KATHLEEN A SWAIN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 242 HIGHVIEW		Transaction ID: A2006-1164088	
City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 48.97		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Enterprise Applicatio		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.12		

Full Name (Last, First, Middle Initial) C. KATHLEEN A SWAIN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 242 HIGHVIEW		Transaction ID: A2006-1357996	
City State Zip Code ELMHURST IL 60126	Amount of Each Receipt this Period 48.97		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Enterprise Applicatio		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 824.09		

SUBTOTAL of Receipts This Page (optional) ▶	189.02
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 244 / 314
	(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

Full Name (Last, First, Middle Initial) A. KIMBERLY A SYME		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1609 SURRIDGE CT		Transaction ID: A2006-1358015	
City State Zip Code MUNDELEIN IL 60060	Amount of Each Receipt this Period 14.54		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.38		

Full Name (Last, First, Middle Initial) B. JERROLD S SZOSTAK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1064 W GLENN TRAIL		Transaction ID: A2006-1164132	
City State Zip Code ELK GROVE IL 60007	Amount of Each Receipt this Period 36.51		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Reserve Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 579.36		

Full Name (Last, First, Middle Initial) C. JERROLD S SZOSTAK		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1064 W GLENN TRAIL		Transaction ID: A2006-1358040	
City State Zip Code ELK GROVE IL 60007	Amount of Each Receipt this Period 36.51		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claim Reserve Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.87		

SUBTOTAL of Receipts This Page (optional) ▶	87.56
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 / 314
	<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)
CARL J TACKETT

Mailing Address 307 WENDRON COURT

City State Zip Code
FRANKLIN TN 37069

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

Name of Employer Allstate Insurance Company Occupation Regional Financial Serv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.24

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164099

Amount of Each Receipt this Period
13.44

B. Full Name (Last, First, Middle Initial)
CARL J TACKETT

Mailing Address 307 WENDRON COURT

City State Zip Code
FRANKLIN TN 37069

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

Name of Employer Allstate Insurance Company Occupation Regional Financial Serv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.68

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358007

Amount of Each Receipt this Period
13.44

C. Full Name (Last, First, Middle Initial)
BENJAMIN A TARVER

Mailing Address 2495 EMERALD LANE

City State Zip Code
LINDENHURST IL 60046

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

Name of Employer Allstate Insurance Company Occupation AVP Corporate Security

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.58

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1163955

Amount of Each Receipt this Period
20.85

SUBTOTAL of Receipts This Page (optional)	▶	47.73
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 246 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BENJAMIN A TARVER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 2495 EMERALD LANE		Transaction ID: A2006-1357858
City State Zip Code LINDENHURST IL 60046	Amount of Each Receipt this Period 20.85	
FEC ID number of contributing federal political committee. C		
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 ▼ 348.43	

Full Name (Last, First, Middle Initial) B. TIMOTHY J TAYLOR		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 5314 RENEE AVE.		Transaction ID: A2006-1164010
City State Zip Code CRYSTAL LAKE IL 60014	Amount of Each Receipt this Period 17.57	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 278.77	

Full Name (Last, First, Middle Initial) C. JANICE M TAYLOR		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 7335 ATHLONE		Transaction ID: A2006-1164284
City State Zip Code HOUSTON TX 77088	Amount of Each Receipt this Period 21.94	
FEC ID number of contributing federal political committee. C		
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 ▼ 305.24	

SUBTOTAL of Receipts This Page (optional) ▶	60.36
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LINDSAY F TAYLOR		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 217 E. SHERIDAN PLACE		Transaction ID: A2006-1164348	
City LAKE BLUFF	State IL	Zip Code 60044	Amount of Each Receipt this Period 16.35
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.55		

Full Name (Last, First, Middle Initial) B. TIMOTHY J TAYLOR		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 5314 RENEE AVE.		Transaction ID: A2006-1357916	
City CRYSTAL LAKE	State IL	Zip Code 60014	Amount of Each Receipt this Period 17.57
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.34		

Full Name (Last, First, Middle Initial) C. JANICE M TAYLOR		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 7335 ATHLONE		Transaction ID: A2006-1358201	
City HOUSTON	State TX	Zip Code 77088	Amount of Each Receipt this Period 21.94
FEC ID number of contributing federal political committee. C			
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 ▼ 327.18		

SUBTOTAL of Receipts This Page (optional) ▶	55.86
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LINDSAY F TAYLOR		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 217 E. SHERIDAN PLACE		Transaction ID: A2006-1358266
City State Zip Code LAKE BLUFF IL 60044	Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.90	

Full Name (Last, First, Middle Initial) B. PHILLIP J TELGENHOFF		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 1631 DAUNTING DRIVE		Transaction ID: A2006-1164334
City State Zip Code EL DORADO HILLS CA 95762	Amount of Each Receipt this Period 14.87	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.37	

Full Name (Last, First, Middle Initial) C. PHILLIP J TELGENHOFF		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1631 DAUNTING DRIVE		Transaction ID: A2006-1358252
City State Zip Code EL DORADO HILLS CA 95762	Amount of Each Receipt this Period 14.87	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.24	

SUBTOTAL of Receipts This Page (optional) ▶	46.09
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 249 / 314
	(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

Full Name (Last, First, Middle Initial) A. SEAN D THAKUR		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 4657 LAKE POINT CIRCLE		Transaction ID: A2006-1164274
City State Zip Code LONG GROVE IL 60047	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 13.73
Name of Employer Allstate Insurance Company	Occupation Service Center Senior Man	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.03	

Full Name (Last, First, Middle Initial) B. SEAN D THAKUR		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 4657 LAKE POINT CIRCLE		Transaction ID: A2006-1358190
City State Zip Code LONG GROVE IL 60047	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 13.73
Name of Employer Allstate Insurance Company	Occupation Service Center Senior Man	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

Full Name (Last, First, Middle Initial) C. W. J THOMPSON		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1734 SHOAL CREEK TERRACE		Transaction ID: A2006-1164011
City State Zip Code VERNON HILLS IL 60061	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.05
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.70	

SUBTOTAL of Receipts This Page (optional)	57.51
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 250 / 314
	(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

Full Name (Last, First, Middle Initial) A. MARK L THOMPSON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 3233 N RACINE #2		Transaction ID: A2006-1164296	
City CHICAGO	State IL	Zip Code 60657	Amount of Each Receipt this Period 23.95
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP-PRODUCT NON-STANDARD		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 379.91		

Full Name (Last, First, Middle Initial) B. MARK L THOMPSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 3233 N RACINE #2		Transaction ID: A2006-1358213	
City CHICAGO	State IL	Zip Code 60657	Amount of Each Receipt this Period 23.95
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP-PRODUCT NON-STANDARD		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.86		

Full Name (Last, First, Middle Initial) C. W. J THOMPSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1734 SHOAL CREEK TERRACE		Transaction ID: A2006-1357917	
City VERNON HILLS	State IL	Zip Code 60061	Amount of Each Receipt this Period 30.05
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Senior State Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 505.75		

SUBTOTAL of Receipts This Page (optional) ▶	77.95
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT J TIERNEY		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 6628 RFD-CARRIAGE WAY		Transaction ID: A2006-1164103	
City LONG GROVE	State IL	Zip Code 60047	Amount of Each Receipt this Period 19.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Procurement Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.08		

Full Name (Last, First, Middle Initial) B. ROBERT J TIERNEY		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 6628 RFD-CARRIAGE WAY		Transaction ID: A2006-1358012	
City LONG GROVE	State IL	Zip Code 60047	Amount of Each Receipt this Period 19.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Procurement Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.96		

Full Name (Last, First, Middle Initial) C. LOREE E TOEDMAN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 21949 HICKORY HILL DR.		Transaction ID: A2006-1164314	
City KILDEER	State IL	Zip Code 60047	Amount of Each Receipt this Period 37.03
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP ENCOMPASS FIELD DISTR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 581.56		

SUBTOTAL of Receipts This Page (optional) ▶	76.79
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LOREE E TOEDMAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 21949 HICKORY HILL DR.		Transaction ID: A2006-1358232	
City KILDEER	State IL	Zip Code 60047	Amount of Each Receipt this Period 37.03
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP ENCOMPASS FIELD DISTR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 618.59		

Full Name (Last, First, Middle Initial) B. ROBERT E TRANSON		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2644 N DOUGLAS		Transaction ID: A2006-1164144	
City ARLINGTON HTS	State IL	Zip Code 60004	Amount of Each Receipt this Period 26.32
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Strategic Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.57		

Full Name (Last, First, Middle Initial) C. ROBERT E TRANSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2644 N DOUGLAS		Transaction ID: A2006-1358052	
City ARLINGTON HTS	State IL	Zip Code 60004	Amount of Each Receipt this Period 26.32
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Strategic Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 442.89		

SUBTOTAL of Receipts This Page (optional) ▶	89.67
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 253 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MICHAEL J TREVINO		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1840 N. SAINT ANDREW DR.		Transaction ID: A2006-1164285	
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 30.46		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.81		

Full Name (Last, First, Middle Initial) B. MICHAEL J TREVINO		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1840 N. SAINT ANDREW DR.		Transaction ID: A2006-1358202	
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 30.46		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Communication Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 511.27		

Full Name (Last, First, Middle Initial) C. JOSEPH V TRIPODI		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 565 E DEERPATH RD		Transaction ID: A2006-1164344	
City State Zip Code LAKE FOREST IL 60045	Amount of Each Receipt this Period 99.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation SVP Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1563.46		

SUBTOTAL of Receipts This Page (optional) ▶	160.15
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JOSEPH V TRIPODI		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 565 E DEERPATH RD		Transaction ID: A2006-1358262
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 99.23
Name of Employer Allstate Insurance Company	Occupation SVP Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1662.69	

Full Name (Last, First, Middle Initial) B. DENNIS M TRUSCH		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 0s640 Preston Circle		Transaction ID: A2006-1164002
City Geneva	State IL	Zip Code 60134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.72
Name of Employer Allstate Insurance Company	Occupation Education and Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.07	

Full Name (Last, First, Middle Initial) C. DENNIS M TRUSCH		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 0s640 Preston Circle		Transaction ID: A2006-1357908
City Geneva	State IL	Zip Code 60134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.72
Name of Employer Allstate Insurance Company	Occupation Education and Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.79	

SUBTOTAL of Receipts This Page (optional)	▶	124.67
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. MELINDA S TUNNER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 5430 TALL OAKS DRIVE		Transaction ID: A2006-1164270
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 42.70	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Agency Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.77	

Full Name (Last, First, Middle Initial) B. MELINDA S TUNNER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 5430 TALL OAKS DRIVE		Transaction ID: A2006-1358185
City State Zip Code LONG GROVE IL 60047	Amount of Each Receipt this Period 42.70	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Agency Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 708.47	

Full Name (Last, First, Middle Initial) C. RICHARD D TURANO		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 4960 S CHESTER ST		Transaction ID: A2006-1163935
City State Zip Code ENGLEWOOD CO 80111	Amount of Each Receipt this Period 17.21	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.66	

SUBTOTAL of Receipts This Page (optional) ▶	102.61
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD D TURANO		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 4960 S CHESTER ST		Transaction ID: A2006-1357837	
City ENGLEWOOD	State CO	Zip Code 80111	Amount of Each Receipt this Period 17.21
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.87		

Full Name (Last, First, Middle Initial) B. DAVID J UNROE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 326 ELM CT.		Transaction ID: A2006-1164337	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 19.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.08		

Full Name (Last, First, Middle Initial) C. DAVID J UNROE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 326 ELM CT.		Transaction ID: A2006-1358255	
City LIBERTYVILLE	State IL	Zip Code 60048	Amount of Each Receipt this Period 19.88
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.96		

SUBTOTAL of Receipts This Page (optional) ▶	56.97
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 257 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM A VAINISI		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 636 BALMORAL LANE		Transaction ID: A2006-1164152	
City State Zip Code INVERNESS IL 60067		Amount of Each Receipt this Period 47.10	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 739.39	

Full Name (Last, First, Middle Initial) B. WILLIAM A VAINISI		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 636 BALMORAL LANE		Transaction ID: A2006-1358060	
City State Zip Code INVERNESS IL 60067		Amount of Each Receipt this Period 47.10	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 786.49	

Full Name (Last, First, Middle Initial) C. HELEN K VAN DAAL		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1300 LONGVALLEY RD.		Transaction ID: A2006-1164091	
City State Zip Code GLENVIEW IL 60025		Amount of Each Receipt this Period 18.04	
FEC ID number of contributing federal political committee. C			
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 ▼ 283.54	

SUBTOTAL of Receipts This Page (optional) ▶	112.24
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 / 314
	<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)
HELEN K VAN DAAL

Mailing Address 1300 LONGVALLEY RD.

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Allstate Insurance Company Occupation Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.58

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357999

Amount of Each Receipt this Period
18.04

B. 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 Performance Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 254.30

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164199

Amount of Each Receipt this Period
15.90

C. 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 Performance Lea

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.20

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358108

Amount of Each Receipt this Period
15.90

SUBTOTAL of Receipts This Page (optional)	▶	49.84
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KIMBERLY VAN NOSTERN		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 660 PRESTWICK LANE #205		Transaction ID: A2006-1164339	
City State Zip Code WHEELING IL 60090	Amount of Each Receipt this Period 23.60		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Information Security		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.46		

Full Name (Last, First, Middle Initial) B. KIMBERLY VAN NOSTERN		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 660 PRESTWICK LANE #205		Transaction ID: A2006-1358257	
City State Zip Code WHEELING IL 60090	Amount of Each Receipt this Period 23.60		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation AVP Information Security		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 394.06		

Full Name (Last, First, Middle Initial) C. WILLIAM P VANDERBORG		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 561 W CROOKED STICK CT		Transaction ID: A2006-1164087	
City State Zip Code VERNON HILLS IL 60061	Amount of Each Receipt this Period 32.70		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 522.65		

SUBTOTAL of Receipts This Page (optional) ▶	79.90
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 260 / 314						
	(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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. WILLIAM P VANDERBORG		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 561 W CROOKED STICK CT		Transaction ID: A2006-1357995
City State Zip Code VERNON HILLS IL 60061	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 32.70
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.35	

Full Name (Last, First, Middle Initial) B. PATRICIA C VANLAMMEREN		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 9868 PALACE GREEN WAY		Transaction ID: A2006-1164309
City State Zip Code VIENNA VA 22181	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 51.82
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 ▼ 817.85	

Full Name (Last, First, Middle Initial) C. PATRICIA C VANLAMMEREN		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 9868 PALACE GREEN WAY		Transaction ID: A2006-1358226
City State Zip Code VIENNA VA 22181	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 51.82
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 ▼ 869.67	

SUBTOTAL of Receipts This Page (optional)	136.34
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 261 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BILL VASIOLOGAMBROS		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1309 S. PINE AVE		Transaction ID: A2006-1164222	
City State Zip Code ARLINGTON HTS. IL 60005	Amount of Each Receipt this Period 15.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.03		

Full Name (Last, First, Middle Initial) B. BILL VASIOLOGAMBROS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1309 S. PINE AVE		Transaction ID: A2006-1358132	
City State Zip Code ARLINGTON HTS. IL 60005	Amount of Each Receipt this Period 15.88		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.91		

Full Name (Last, First, Middle Initial) C. RICHARD VAVRA		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 2514 S WESLEY AVENUE		Transaction ID: A2006-1164080	
City State Zip Code BERWYN IL 60402	Amount of Each Receipt this Period 37.52		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 594.87		

SUBTOTAL of Receipts This Page (optional) ▶	69.28
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

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 ▼ 632.39

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1357988

Amount of Each Receipt this Period
37.52

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

Mailing Address 1111 LOYOLA DR

City State Zip Code
LIBERTYVILLE IL 60048

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1172.96

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: A2006-1164271

Amount of Each Receipt this Period
74.22

C. Full Name (Last, First, Middle Initial)
MICHAEL J VELOTTA

Mailing Address 1111 LOYOLA DR

City State Zip Code
LIBERTYVILLE IL 60048

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1247.18

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: A2006-1358187

Amount of Each Receipt this Period
74.22

SUBTOTAL of Receipts This Page (optional)	▶	185.96
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 263 / 314
	<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)
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 ▼ 1019.64

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1163951

Amount of Each Receipt this Period
64.83

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 ▼ 1084.47

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357853

Amount of Each Receipt this Period
64.83

C. Full Name (Last, First, Middle Initial)
ROBERT D VOLLENHALS

Mailing Address 24682 MONTE ROYALE

City State Zip Code
LAGUNA HILLS CA 92653

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

Name of Employer Allstate Insurance Company Occupation Territory Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.44

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164330

Amount of Each Receipt this Period
16.34

SUBTOTAL of Receipts This Page (optional)	▶	146.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROBERT D VOLLENHALS		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 24682 MONTE ROYALE		Transaction ID: A2006-1358248
City State Zip Code LAGUNA HILLS CA 92653	Amount of Each Receipt this Period 16.34	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Territory Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.78	

Full Name (Last, First, Middle Initial) B. MADELINE J WALKER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 5140 N SAN JUAN AVE		Transaction ID: A2006-1164049
City State Zip Code CLOVIS CA 93611	Amount of Each Receipt this Period 28.43	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.13	

Full Name (Last, First, Middle Initial) C. MADELINE J WALKER		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 5140 N SAN JUAN AVE		Transaction ID: A2006-1357957
City State Zip Code CLOVIS CA 93611	Amount of Each Receipt this Period 28.43	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Marketing Claims Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 479.56	

SUBTOTAL of Receipts This Page (optional) ▶	73.20
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ANTON WANDERON		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 112 BRISTOL PLACE		Transaction ID: A2006-1164028
City State Zip Code PONTE VEDRA FL 32082	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 48.47
Name of Employer Allstate Insurance Company	Occupation DIRECTOR CREDIT DEPARTMEN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 814.52	

Full Name (Last, First, Middle Initial) B. ANTON WANDERON		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 112 BRISTOL PLACE		Transaction ID: A2006-1357936
City State Zip Code PONTE VEDRA FL 32082	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 48.47
Name of Employer Allstate Insurance Company	Occupation DIRECTOR CREDIT DEPARTMEN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 862.99	

Full Name (Last, First, Middle Initial) C. THOMAS M WARDEN		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 146 LA GRANDE		Transaction ID: A2006-1164042
City State Zip Code MOSS BEACH CA 94038	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.69
Name of Employer Allstate Insurance Company	Occupation AVP Research Center	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 478.93	

SUBTOTAL of Receipts This Page (optional)	127.63
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 266 / 314
	(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

Full Name (Last, First, Middle Initial) A. THOMAS M WARDEN		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 146 LA GRANDE		Transaction ID: A2006-1357950
City MOSS BEACH	State CA	Zip Code 94038
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.69
Name of Employer Allstate Insurance Company	Occupation AVP Research Center	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 509.62	

Full Name (Last, First, Middle Initial) B. EDWIN L WASINGER JR		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 6245 MURIFIELD DRIVE		Transaction ID: A2006-1164219
City GURNEE	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.09
Name of Employer Allstate Insurance Company	Occupation Procurement Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.04	

Full Name (Last, First, Middle Initial) C. EDWIN L WASINGER JR		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 6245 MURIFIELD DRIVE		Transaction ID: A2006-1358129
City GURNEE	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.09
Name of Employer Allstate Insurance Company	Occupation Procurement Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 553.13	

SUBTOTAL of Receipts This Page (optional)	96.87
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 / 314
	<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)
JOHN A WATSON

Mailing Address 10227 Thurston Groves Blvd.

City	State	Zip Code
Seminole	FL	33778

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 ▼
242.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	0	6

Transaction ID: A2006-1164321

Amount of Each Receipt this Period
15.37

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

Mailing Address 10227 Thurston Groves Blvd.

City	State	Zip Code
Seminole	FL	33778

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 ▼
258.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	8	/	2	0	0	6

Transaction ID: A2006-1358239

Amount of Each Receipt this Period
15.37

C. Full Name (Last, First, Middle Initial)
BRET D WEHRLY

Mailing Address 2079 POWHATAN TRAIL

City	State	Zip Code
RICHMOND	KY	40475

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

Name of Employer Allstate Insurance Company	Occupation Agency Consultant
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	8	/	2	0	0	6

Transaction ID: A2006-1358220

Amount of Each Receipt this Period
12.28

SUBTOTAL of Receipts This Page (optional)	▶	43.02
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 / 314
	<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)
DOUGLAS B WELCH

Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Allstate Insurance Company Occupation Vice President Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 835.07

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164069

Amount of Each Receipt this Period
53.15

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

Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Allstate Insurance Company Occupation Vice President Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 888.22

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357976

Amount of Each Receipt this Period
53.15

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 ▼ 470.01

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164298

Amount of Each Receipt this Period
30.43

SUBTOTAL of Receipts This Page (optional)	▶	136.73
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 269 / 314
	(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

Full Name (Last, First, Middle Initial) A. JONATHAN J WELLS		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 5394 W RIVER BEND DRIVE		Transaction ID: A2006-1358215
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.43
Name of Employer Allstate Insurance Company	Occupation Bank Cash Management Dire	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.44	

Full Name (Last, First, Middle Initial) B. ROBERT J WHITE		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 909 STILLWATER COURT		Transaction ID: A2006-1163969
City WESTON	State FL	Zip Code 33327
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.69
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 523.04	

Full Name (Last, First, Middle Initial) C. ROBERT J WHITE		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 909 STILLWATER COURT		Transaction ID: A2006-1357875
City WESTON	State FL	Zip Code 33327
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.69
Name of Employer Allstate Insurance Company	Occupation Territorial Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.73	

SUBTOTAL of Receipts This Page (optional)	▶	95.81
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. SAMUEL W WHITEMAN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 120 NE STONELEDGE PLACE		Transaction ID: A2006-1164286
City State Zip Code LEESBURG VA 20176	Amount of Each Receipt this Period 29.58	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 377.86	

Full Name (Last, First, Middle Initial) B. SAMUEL W WHITEMAN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 120 NE STONELEDGE PLACE		Transaction ID: A2006-1358203
City State Zip Code LEESBURG VA 20176	Amount of Each Receipt this Period 29.58	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 407.44	

Full Name (Last, First, Middle Initial) C. CYNTHIA A WHITFIELD		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 135 CAMBRIDGE DR.		Transaction ID: A2006-1163954
City State Zip Code AURORA OH 44202	Amount of Each Receipt this Period 16.35	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Risk Management Business	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.80	

SUBTOTAL of Receipts This Page (optional) ▶	75.51
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 / 314
	<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)
CYNTHIA A WHITFIELD

Mailing Address 135 CAMBRIDGE DR.

City State Zip Code
AURORA OH 44202

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

Name of Employer Allstate Insurance Company Occupation Risk Management Business

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 299.15

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357857

Amount of Each Receipt this Period
16.35

B. Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 564.30

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164013

Amount of Each Receipt this Period
35.80

C. Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City State Zip Code
CRYSTAL LAKE IL 60012

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.10

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357919

Amount of Each Receipt this Period
35.80

SUBTOTAL of Receipts This Page (optional)	▶	87.95
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 272 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. ROB WHOLF		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 847 INTERLAKEN DRIVE		Transaction ID: A2006-1164057	
City State Zip Code LAKE ZURICH IL 60047		Amount of Each Receipt this Period 21.79	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 348.64	

Full Name (Last, First, Middle Initial) B. ROB WHOLF		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 847 INTERLAKEN DRIVE		Transaction ID: A2006-1357965	
City State Zip Code LAKE ZURICH IL 60047		Amount of Each Receipt this Period 21.79	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Claims Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 370.43	

Full Name (Last, First, Middle Initial) C. JOHN K WILCOX		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1120 JESSICA LANE		Transaction ID: A2006-1164102	
City State Zip Code LIBERTYVILLE IL 60048		Amount of Each Receipt this Period 30.33	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Product Operations Direct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.13	

SUBTOTAL of Receipts This Page (optional) ▶	73.91
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 273 / 314
	(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

Full Name (Last, First, Middle Initial) A. JOHN K WILCOX		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 1120 JESSICA LANE		Transaction ID: A2006-1358011
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.33
Name of Employer Allstate Insurance Company	Occupation Product Operations Direct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.46	

Full Name (Last, First, Middle Initial) B. ANISE D WILEY-LITTLE		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 21030 W YORKSHIRE DR		Transaction ID: A2006-1164315
City KILDEER	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.23
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.79	

Full Name (Last, First, Middle Initial) C. ANISE D WILEY-LITTLE		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 21030 W YORKSHIRE DR		Transaction ID: A2006-1358233
City KILDEER	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.23
Name of Employer Allstate Insurance Company	Occupation Human Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.02	

SUBTOTAL of Receipts This Page (optional)	108.79
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JEFFREY W WILLIAMS		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 7104 CHARDON COURT		Transaction ID: A2006-1164135
City	State	Zip Code
CLARKSVILLE	MD	21029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.35
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 ▼ 590.40	

Full Name (Last, First, Middle Initial) B. JEFFREY W WILLIAMS		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 7104 CHARDON COURT		Transaction ID: A2006-1358043
City	State	Zip Code
CLARKSVILLE	MD	21029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.35
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 ▼ 627.75	

Full Name (Last, First, Middle Initial) C. THOMAS J WILSON		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 2024 N. MOHAWK		Transaction ID: A2006-1164237
City	State	Zip Code
CHICAGO	IL	60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.69
Name of Employer Allstate Insurance Company	Occupation President & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3026.55	

SUBTOTAL of Receipts This Page (optional)	▶	267.39
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 275 / 314
	(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

Full Name (Last, First, Middle Initial) A. THOMAS J WILSON		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2024 N. MOHAWK		Transaction ID: A2006-1358150	
City CHICAGO	State IL	Zip Code 60614	Amount of Each Receipt this Period 192.69
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation President & COO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3219.24		

Full Name (Last, First, Middle Initial) B. KURT L WINTER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1403 N. WALNUT		Transaction ID: A2006-1164357	
City ARLINGTON HGHTS	State IL	Zip Code 60004	Amount of Each Receipt this Period 15.18
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.93		

Full Name (Last, First, Middle Initial) C. KURT L WINTER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1403 N. WALNUT		Transaction ID: A2006-1358275	
City ARLINGTON HGHTS	State IL	Zip Code 60004	Amount of Each Receipt this Period 15.18
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Marketing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.11		

SUBTOTAL of Receipts This Page (optional) ▶	223.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. BRUCE A WOIKE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 1318 N. CHESTNUT AVE.		Transaction ID: A2006-1164209
City State Zip Code ARLINGTON HTS. IL 60004	Amount of Each Receipt this Period 19.88	
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 ▼ 343.93	

Full Name (Last, First, Middle Initial) B. BRUCE A WOIKE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1318 N. CHESTNUT AVE.		Transaction ID: A2006-1358119
City State Zip Code ARLINGTON HTS. IL 60004	Amount of Each Receipt this Period 19.88	
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 ▼ 363.81	

Full Name (Last, First, Middle Initial) C. RHONDA WOODARD		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 2341 MARCY AVENUE		Transaction ID: A2006-1164307
City State Zip Code EVANSTON IL 60201	Amount of Each Receipt this Period 34.21	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-PRODUCT DELIVERY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.36	

SUBTOTAL of Receipts This Page (optional) ▶	73.97
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 277 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RHONDA WOODARD		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 2341 MARCY AVENUE		Transaction ID: A2006-1358224	
City State Zip Code EVANSTON IL 60201	Amount of Each Receipt this Period 34.21		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation VP-PRODUCT DELIVERY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 574.57		

Full Name (Last, First, Middle Initial) B. DAVID E WOOLWINE		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1608 W. ROSEHILL DR		Transaction ID: A2006-1164001	
City State Zip Code CHICAGO IL 60660	Amount of Each Receipt this Period 13.98		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.33		

Full Name (Last, First, Middle Initial) C. DAVID E WOOLWINE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1608 W. ROSEHILL DR		Transaction ID: A2006-1357907	
City State Zip Code CHICAGO IL 60660	Amount of Each Receipt this Period 13.98		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Field Operations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.31		

SUBTOTAL of Receipts This Page (optional) ▶	62.17
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 / 314
	<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)
COURTNEY M WRIGHT

Mailing Address 1221 GRAND VIEW DRIVE

City MABLETON State GA Zip Code 30126

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 ▼ 240.12

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164019

Amount of Each Receipt this Period
15.22

B. Full Name (Last, First, Middle Initial)
COURTNEY M WRIGHT

Mailing Address 1221 GRAND VIEW DRIVE

City MABLETON State GA Zip Code 30126

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 ▼ 255.34

Date of Receipt
08 / 18 / 2006

Transaction ID: A2006-1357925

Amount of Each Receipt this Period
15.22

C. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR

Mailing Address 811 DRESSER DR.

City MT PROSPECT State IL Zip Code 60056

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

Name of Employer Allstate Insurance Company Occupation CC IT Systems Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 524.15

Date of Receipt
08 / 04 / 2006

Transaction ID: A2006-1164107

Amount of Each Receipt this Period
33.35

SUBTOTAL of Receipts This Page (optional) ▶ **63.79**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 279 / 314
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DONALD F WYATT JR		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 811 DRESSER DR.		Transaction ID: A2006-1358016	
City State Zip Code MT PROSPECT IL 60056	Amount of Each Receipt this Period 33.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation CC IT Systems Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 557.50		

Full Name (Last, First, Middle Initial) B. FLOYD M YAGER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 1610 BIRCH LANE		Transaction ID: A2006-1164172	
City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 45.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 708.95		

Full Name (Last, First, Middle Initial) C. FLOYD M YAGER		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 1610 BIRCH LANE		Transaction ID: A2006-1358081	
City State Zip Code PARK RIDGE IL 60068	Amount of Each Receipt this Period 45.25		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Assistant Field Vice Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.20		

SUBTOTAL of Receipts This Page (optional) ▶	123.85
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. LORI J YELVINGTON		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1531 N HIGHLAND AVE		Transaction ID: A2006-1164180	
City State Zip Code ARLINGTON HGTS. IL 60004		Amount of Each Receipt this Period 43.86	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Procurement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 684.40	

Full Name (Last, First, Middle Initial) B. LORI J YELVINGTON		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1531 N HIGHLAND AVE		Transaction ID: A2006-1358089	
City State Zip Code ARLINGTON HGTS. IL 60004		Amount of Each Receipt this Period 43.86	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation AVP Procurement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 728.26	

Full Name (Last, First, Middle Initial) C. RICHARD P YOCIUS		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 40135 N GOLDENROD		Transaction ID: A2006-1164109	
City State Zip Code WADSWORTH IL 60083		Amount of Each Receipt this Period 39.76	
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company		Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 636.16	

SUBTOTAL of Receipts This Page (optional) ▶	127.48
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD P YOCIUS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 40135 N GOLDENROD		Transaction ID: A2006-1358018
City State Zip Code WADSWORTH IL 60083	Amount of Each Receipt this Period 39.76	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior State Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.92	

Full Name (Last, First, Middle Initial) B. JAMES E YOUNG		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 1212 N. WELLS ST.		Transaction ID: A2006-1163996
City State Zip Code CHICAGO IL 60610	Amount of Each Receipt this Period 16.85	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation CC IT Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.92	

Full Name (Last, First, Middle Initial) C. PHILLIP C YOUNG		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 2181 APPLE HILL LANE		Transaction ID: A2006-1164140
City State Zip Code BUFFALO GROVE IL 60089	Amount of Each Receipt this Period 17.39	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Director of Flight Operat	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.49	

SUBTOTAL of Receipts This Page (optional) ▶	74.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 / 314
	<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)
JAMES E YOUNG

Mailing Address 1212 N. WELLS ST.

City State Zip Code
CHICAGO IL 60610

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 ▼ 276.77

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1357902

Amount of Each Receipt this Period
16.85

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 ▼ 291.88

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358048

Amount of Each Receipt this Period
17.39

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 ▼ 993.11

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164254

Amount of Each Receipt this Period
62.87

SUBTOTAL of Receipts This Page (optional)	▶	97.11
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 283 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. RICHARD M ZAHARIAS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1439 STEVENSON DRIVE		Transaction ID: A2006-1358169
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 62.87	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Allstate Life Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1055.98	

Full Name (Last, First, Middle Initial) B. ROBERT F ZEMBRASKI JR		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006
Mailing Address 1113 W WRIGHTWOOD # 1E		Transaction ID: A2006-1163912
City State Zip Code CHICAGO IL 60614	Amount of Each Receipt this Period 14.94	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Consultant-M2600	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.49	

Full Name (Last, First, Middle Initial) C. ROBERT F ZEMBRASKI JR		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 1113 W WRIGHTWOOD # 1E		Transaction ID: A2006-1357815
City State Zip Code CHICAGO IL 60614	Amount of Each Receipt this Period 14.94	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Consultant-M2600	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.43	

SUBTOTAL of Receipts This Page (optional) ▶	92.75
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. PAUL K ZIGTERMAN		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 236 SOUTH RIVERSIDE DRIVE		Transaction ID: A2006-1164225
City VILLA PARK	State IL	Zip Code 60181
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.22
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 ▼ 288.47	

Full Name (Last, First, Middle Initial) B. PAUL K ZIGTERMAN		Date of Receipt MM / DD / YYYY 08 / 18 / 2006
Mailing Address 236 SOUTH RIVERSIDE DRIVE		Transaction ID: A2006-1358135
City VILLA PARK	State IL	Zip Code 60181
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.22
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 ▼ 306.69	

Full Name (Last, First, Middle Initial) C. JAMES P ZILS		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 832 PADDOCK LANE		Transaction ID: A2006-1164287
City LIBERTYVILLE	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.34
Name of Employer Allstate Insurance Company	Occupation VP Investment Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 571.36	

SUBTOTAL of Receipts This Page (optional)	72.78
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 / 314
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. JAMES P ZILS		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 832 PADDOCK LANE		Transaction ID: A2006-1358204	
City State Zip Code LIBERTYVILLE IL 60048	Amount of Each Receipt this Period 36.34		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation VP Investment Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 607.70		

Full Name (Last, First, Middle Initial) B. JESSE W ZIMMERMAN		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 333 WEST HUBBARD STREET #623		Transaction ID: A2006-1163915	
City State Zip Code CHICAGO IL 60610	Amount of Each Receipt this Period 12.95		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Product Operations Senior		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) C. JESSE W ZIMMERMAN		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 333 WEST HUBBARD STREET #623		Transaction ID: A2006-1357817	
City State Zip Code CHICAGO IL 60610	Amount of Each Receipt this Period 12.95		
FEC ID number of contributing federal political committee. C			
Name of Employer Allstate Insurance Company	Occupation Product Operations Senior		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.95		

SUBTOTAL of Receipts This Page (optional) ▶	62.24
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 / 314
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 543.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164245

Amount of Each Receipt this Period
34.50

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 577.50

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2006

Transaction ID: A2006-1358160

Amount of Each Receipt this Period
34.50

C. Full Name (Last, First, Middle Initial)
J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Allstate Insurance Company Occupation AVP HR People Planning &

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 531.45

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2006

Transaction ID: A2006-1164304

Amount of Each Receipt this Period
33.78

SUBTOTAL of Receipts This Page (optional)	▶	102.78
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 287 / 314	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
Allstate Insurance Company AVP HR People Planning &

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **565.23**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	8	/	2	0	0	6

Transaction ID: A2006-1358221

Amount of Each Receipt this Period

33.78

SUBTOTAL of Receipts This Page (optional)	33.78
TOTAL This Period (last page this line number only)	27504.41

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 288 / 314
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="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)
Friends of John C. Astle

Mailing Address 2020 Gov. Thomas Bladen Way #201.

City	State	Zip Code
Annapolis	MD	21401

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2006

Transaction ID: A5529

Amount of Each Receipt this Period
2250.00

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	2250.00

**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)

PAGE 289 / 314

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Fifth Third Bank		Transaction ID: B148875	
Mailing Address 346 West Carol Lane		Date of Disbursement MM / DD / YYYY 08 / 11 / 2006	
City Elmhurst	State IL	Zip Code 60062	Amount of Each Disbursement this Period 157.19
Purpose of Disbursement Bank Service Charge		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: IL	District:		

Full Name (Last, First, Middle Initial) B. Fifth Third Bank		Transaction ID: B148876	
Mailing Address 346 West Carol Lane		Date of Disbursement MM / DD / YYYY 08 / 11 / 2006	
City Elmhurst	State IL	Zip Code 60062	Amount of Each Disbursement this Period 0.05
Purpose of Disbursement Bank Service Charge		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: IL	District:		

SUBTOTAL of Disbursements This Page (optional) ►

157.24

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

157.24

**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 290 / 314

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Pryce for Congress		Transaction ID: B140235 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6	
Mailing Address 145 E Rich Street		Amount of Each Disbursement this Period -1000.00	
City Columbus State OH Zip Code 43215	Check Voided. Originally reported on FEC May Monthly.		
Purpose of Disbursement P-2006 U.S. House 15 OH			011 Category/ Type
Candidate Name Deborah Pryce			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 15

Full Name (Last, First, Middle Initial) B. Pryce for Congress		Transaction ID: B145868 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6	
Mailing Address 145 E Rich Street		Amount of Each Disbursement this Period 1000.00	
City Columbus State OH Zip Code 43215	Check Voided. Originally reported on FEC May Monthly.		
Purpose of Disbursement G-2006 U.S. House 15 OH			011 Category/ Type
Candidate Name Deborah Pryce			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 15

Full Name (Last, First, Middle Initial) C. Property Casualty Insurers PAC (PCI PAC)		Transaction ID: B145570 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6	
Mailing Address 2600 South River Road		Amount of Each Disbursement this Period 5000.00	
City Des Plaines State IL Zip Code 60018	Check Voided. Originally reported on FEC May Monthly.		
Purpose of Disbursement O-2006 Fed Multi-cand. PAC US			011 Category/ Type
Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: IL District: Not Applicable

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 291 / 314

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Talent for Senate Committee		Transaction ID: B145572 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 507 Capitol Court NE #100		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. Senate MO		
Candidate Name James M Talent		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mike DeWine for U.S. Senate		Transaction ID: B146774 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 340188		Amount of Each Disbursement this Period 1000.00
City Columbus State OH Zip Code 43234	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. Senate OH		
Candidate Name Mike DeWine		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cantor for Congress		Transaction ID: B146775 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 21027		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20009	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 07 VA		
Candidate Name Eric I Cantor		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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 292 / 314

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Hastert for Congress Cmte		Transaction ID: B146777 Date of Disbursement 08 / 16 / 2006
Mailing Address P O Box 625		Amount of Each Disbursement this Period 1000.00
City Batavia State IL Zip Code 60510	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 14 IL		
Candidate Name J. Dennis Hastert		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens for Gillmor		Transaction ID: B146779 Date of Disbursement 08 / 16 / 2006
Mailing Address 217 3rd Street SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 05 OH		
Candidate Name Paul E Gillmor		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Clay Shaw		Transaction ID: B147669 Date of Disbursement 08 / 31 / 2006
Mailing Address P.O. Box 2188		Amount of Each Disbursement this Period 2000.00
City Fort Lauderdale State FL Zip Code 33303	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 22 FL		
Candidate Name E. C Shaw		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 293 / 314

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Friends of Mark Foley		Transaction ID: B147670 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 1316 Lake Victoria Drive		Amount of Each Disbursement this Period 1000.00
City Lake Worth State FL Zip Code 33461	Purpose of Disbursement G-2006 U.S. House 16 FL Candidate Name Mark A Foley Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Scott Garrett for Congress		Transaction ID: B147671 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 217 3rd Street SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement G-2006 U.S. House 05 NJ Candidate Name E. Scott Garrett Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of John Thune		Transaction ID: B147685 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 2555 Pennsylvania Ave. NW #908		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20037	Purpose of Disbursement P-2010 U.S. Senate SD Candidate Name John Thune Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. DeMint for Senate		Transaction ID: B147686 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address P.O. Box 12425		Amount of Each Disbursement this Period 1000.00
City Columbia State SC Zip Code 29211	011 Category/ Type	
Purpose of Disbursement P-2010 U.S. Senate SC		
Candidate Name James DeMint		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeff Fortenberry for U.S. Congress		Transaction ID: B147690 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address PO Box 30265		Amount of Each Disbursement this Period 1000.00
City Lincoln State NE Zip Code 68508	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 01 NE		
Candidate Name Jeff Fortenberry		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Trust PAC		Transaction ID: B147691 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22301	011 Category/ Type	
Purpose of Disbursement O-2006 Fed Multi-cand. PAC VA		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	19000.00

**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

Full Name (Last, First, Middle Initial) A. Aurand for State Representative		Transaction ID: B147692 Date of Disbursement 08 / 31 / 2006
Mailing Address 2136 30 Road		Amount of Each Disbursement this Period 250.00
City Courtland	State KS Zip Code 66939	
Purpose of Disbursement G-2006 State House 109 KS		
Candidate Name Clay Aurand		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS District: 10		

Full Name (Last, First, Middle Initial) B. Barnett for Governor		Transaction ID: B147699 Date of Disbursement 08 / 31 / 2006
Mailing Address PO Box 1937		Amount of Each Disbursement this Period 250.00
City Emporia	State KS Zip Code 66801	
Purpose of Disbursement G-2006 Governor KS		
Candidate Name James Barnett		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS District:		

Full Name (Last, First, Middle Initial) C. Brunk for State Representative		Transaction ID: B147700 Date of Disbursement 08 / 31 / 2006
Mailing Address 4430 Janesville St.		Amount of Each Disbursement this Period 250.00
City Bel Aire	State KS Zip Code 67220	
Purpose of Disbursement G-2006 State House 85 KS		
Candidate Name Steve Brunk		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS District: 85		

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. KS Republican Senatorial Cmte		Transaction ID: B147702 Date of Disbursement 08 / 31 / 2006	
Mailing Address P.O. Box 2663		Amount of Each Disbursement this Period 200.00	
City Topeka	State KS	Zip Code 66601	011 Category/ Type
Purpose of Disbursement O-2006 State Multi-cand. Party Cmte KS			
Candidate Name			Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: KS District:		

Full Name (Last, First, Middle Initial) B. McCreary for State Representative		Transaction ID: B147703 Date of Disbursement 08 / 31 / 2006	
Mailing Address 1423 North C Street		Amount of Each Disbursement this Period 200.00	
City Wellington	State KS	Zip Code 67152	011 Category/ Type
Purpose of Disbursement G-2006 State House 80 KS			
Candidate Name Bill McCreary			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: KS District: 80		

Full Name (Last, First, Middle Initial) C. Stephen R. Morris for Senate		Transaction ID: B147706 Date of Disbursement 08 / 31 / 2006	
Mailing Address PO Box 415		Amount of Each Disbursement this Period 200.00	
City Hugoton	State KS	Zip Code 67951	011 Category/ Type
Purpose of Disbursement P-2008 State Senate 39 KS			
Candidate Name Stephen (Steve) R Morris			Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: KS District: 39		

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
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)

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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

Full Name (Last, First, Middle Initial) A. Peck for State Representative		Transaction ID: B147708 Date of Disbursement 08 / 31 / 2006	
Mailing Address PO Box 251		Amount of Each Disbursement this Period 200.00	
City Tyro State KS Zip Code 67364	Purpose of Disbursement G-2006 State House 11 KS Candidate Name Virgil Peck	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kansans for Praeger		Transaction ID: B147709 Date of Disbursement 08 / 31 / 2006	
Mailing Address P.O. Box 1001		Amount of Each Disbursement this Period 500.00	
City Topeka State KS Zip Code 66601	Purpose of Disbursement G-2006 State Insur. Comm. KS Candidate Name Sandy Praeger	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kansans for Derek Schmidt		Transaction ID: B147710 Date of Disbursement 08 / 31 / 2006	
Mailing Address P.O. Box 747		Amount of Each Disbursement this Period 250.00	
City Independence State KS Zip Code 67301	Purpose of Disbursement P-2008 State Senate 15 KS Candidate Name Derek Schmidt	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Vicki Schmidt for State Senate		Transaction ID: B147712 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 2619 SW Randolph Court		Amount of Each Disbursement this Period 250.00
City Topeka State KS Zip Code 66611	011 Category/ Type	
Purpose of Disbursement P-2008 State Senate 20 KS		
Candidate Name Vickie Schmidt		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 20	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Shultz for State Representative		Transaction ID: B147713 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 707 Washington Circle		Amount of Each Disbursement this Period 250.00
City Lindsborg State KS Zip Code 67456	011 Category/ Type	
Purpose of Disbursement G-2006 State House 73 KS		
Candidate Name Clark Shultz		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 73	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ruth Teichman for State Senate		Transaction ID: B147716 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 434 East Old Highway 50		Amount of Each Disbursement this Period 250.00
City Stafford State KS Zip Code 67578	011 Category/ Type	
Purpose of Disbursement P-2008 State Senate 33 KS		
Candidate Name Ruth Teichman		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 33	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. John Vratil for State Senate		Transaction ID: B147721 Date of Disbursement 08 / 31 / 2006
Mailing Address 9534 Lee Blvd.		Amount of Each Disbursement this Period 250.00
City Leawood State KS Zip Code 66206	011 Category/ Type	
Purpose of Disbursement P-2008 State Senate 11 KS		
Candidate Name John L Vratil		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. David Wysong for State Senator		Transaction ID: B147723 Date of Disbursement 08 / 31 / 2006
Mailing Address 6630 Indian Lane		Amount of Each Disbursement this Period 250.00
City Mission Hills State KS Zip Code 66208	011 Category/ Type	
Purpose of Disbursement P-2008 State Senate 07 KS		
Candidate Name David Wysong		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends for Combs		Transaction ID: B147724 Date of Disbursement 08 / 31 / 2006
Mailing Address 703 5th Street PO Box 306		Amount of Each Disbursement this Period 500.00
City Milligan State NE Zip Code 68406	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 32 NE		
Candidate Name Jeanne M. Combs		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 32	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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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

Full Name (Last, First, Middle Initial) A. Mike Friend for Legislature		Transaction ID: B147725 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 8990 W. Dodge Rd. #220		Amount of Each Disbursement this Period 500.00
City Omaha State NE Zip Code 68114	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 10 NE		
Candidate Name Mike Friend		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tim Gay for Legislature		Transaction ID: B147726 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 804 Lexington Lane P.O. Box 460922		Amount of Each Disbursement this Period 250.00
City Papillion State NE Zip Code 68046	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 14 NE		
Candidate Name Tim Gay		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 14	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cmte. to Elect Steve Guittar		Transaction ID: B147728 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 2649 North 48th Suite B		Amount of Each Disbursement this Period 250.00
City Lincoln State NE Zip Code 68504	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 26 NE		
Candidate Name Steve Guittar		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 26	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶

**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

Full Name (Last, First, Middle Initial) A. John N. Harms for Legislature		Transaction ID: B147731 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 1918 East 28th Street		Amount of Each Disbursement this Period 500.00
City State Zip Code Scottsbluff NE 69361	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 48 NE		
Candidate Name John N Harms		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 48	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. The Governor Heineman Cmte		Transaction ID: B147733 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 11049 I Street		Amount of Each Disbursement this Period 250.00
City State Zip Code Omaha NE 68137	011 Category/ Type	
Purpose of Disbursement G-2006 Governor NE		
Candidate Name Dave Heineman		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mines for Legislature		Transaction ID: B147734 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 1650 Washington Street		Amount of Each Disbursement this Period 500.00
City State Zip Code Blair NE 68008	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 18 NE		
Candidate Name Mick A. Mines		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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)

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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

Full Name (Last, First, Middle Initial) A. Pankonin for Legislature		Transaction ID: B147739 Date of Disbursement 08 / 31 / 2006
Mailing Address PO Box 106		Amount of Each Disbursement this Period 500.00
City Louisville	State NE Zip Code 68037	
Purpose of Disbursement G-2006 State Senate 2 NE		
Candidate Name Dave Pankonin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE District: 2		

Full Name (Last, First, Middle Initial) B. Kent Rogert for Legislature		Transaction ID: B147745 Date of Disbursement 08 / 31 / 2006
Mailing Address 1026 County Road 47 PO Box 114		Amount of Each Disbursement this Period 250.00
City Tekamah	State NE Zip Code 68061	
Purpose of Disbursement G-2006 State Senate 16 NE		
Candidate Name Kent Rogert		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE District: 16		

Full Name (Last, First, Middle Initial) C. Stothert for Legislature		Transaction ID: B147749 Date of Disbursement 08 / 31 / 2006
Mailing Address 5909 South 118th Plaza		Amount of Each Disbursement this Period 500.00
City Omaha	State NE Zip Code 68137	
Purpose of Disbursement G-2006 State Senate 12 NE		
Candidate Name Jean Stothert		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE District: 12		

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)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Friends of Clayborne		Transaction ID: B147752 Date of Disbursement 08 / 31 / 2006
Mailing Address P.O. Box 231		Amount of Each Disbursement this Period 1000.00
City Bellville	State IL Zip Code 62222	
Purpose of Disbursement G-2006 State Senate 57 IL		
Candidate Name James F Clayborne		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 57		

Full Name (Last, First, Middle Initial) B. Citizens for Beaubien		Transaction ID: B147755 Date of Disbursement 08 / 31 / 2006
Mailing Address 4 Acorn Lane		Amount of Each Disbursement this Period 500.00
City Barrington	State IL Zip Code 60010	
Purpose of Disbursement G-2006 State House 52 IL		
Candidate Name Mark Beaubien		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 52		

Full Name (Last, First, Middle Initial) C. Citizens for Louis Lang		Transaction ID: B147756 Date of Disbursement 08 / 31 / 2006
Mailing Address PO Box 1815		Amount of Each Disbursement this Period 500.00
City Skokie	State IL Zip Code 60076	
Purpose of Disbursement G-2006 State House 16 IL		
Candidate Name Louis I Lang		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 16		

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Friends of Karen May		Transaction ID: B147759	
Mailing Address 460 Hazel Ave.		Date of Disbursement 08 / 31 / 2006	
City Highland Park	State IL	Zip Code 60035	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement G-2006 State House 58 IL		011 Category/ Type	
Candidate Name Karen May			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 58			

Full Name (Last, First, Middle Initial) B. Benoit for Assembly 2006 ID# 1273003		Transaction ID: B147619	
Mailing Address 7111 Bettola Place		Date of Disbursement 08 / 30 / 2006	
City Alta Loma	State CA	Zip Code 91701	Amount of Each Disbursement this Period 1300.00
Purpose of Disbursement G-2006 State House 64 CA		011 Category/ Type	
Candidate Name John J Benoit			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 64			

Full Name (Last, First, Middle Initial) C. Joe Coto for State Assembly ID#1272831		Transaction ID: B147622	
Mailing Address 1127 11th Street Suite 606		Date of Disbursement 08 / 30 / 2006	
City Sacramento	State CA	Zip Code 95814	Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement G-2006 State House 23 CA		011 Category/ Type	
Candidate Name Joe Coto			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 23			

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)

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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

Full Name (Last, First, Middle Initial) A. De La Torre for Asmby '06 ID#1273623		Transaction ID: B147625 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 1127 11th Street Suite 505		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95814	011 Category/ Type	
Purpose of Disbursement G-2006 State House 50 CA		
Candidate Name Hector De La Torre		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. The Cmte to Elect Jim Battin ID#1285701		Transaction ID: B147637 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address P.O. Box 1565		Amount of Each Disbursement this Period 1000.00
City Oakdale State CA Zip Code 95361	011 Category/ Type	
Purpose of Disbursement P-2010 Lt. Governor CA		
Candidate Name Jim Battin		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tom Harman For Senate ID# 1277569		Transaction ID: B147638 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 22032 Capistrano Lane		Amount of Each Disbursement this Period 1000.00
City Huntington Beach State CA Zip Code 92646	011 Category/ Type	
Purpose of Disbursement O-2006 State Senate 35 CA		
Candidate Name Tom Harman		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 35	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ DR Special General	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Villines for Assembly 2006 ID#1273187		Transaction ID: B147639	
Mailing Address P.O. Box 606		Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
City Fresno	State CA	Zip Code 93709	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement G-2006 State House 29 CA		011 Category/ Type	
Candidate Name Mike Villines			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 29			

Full Name (Last, First, Middle Initial) B. Shirley Horton for Asmbly '06 ID# 1273236		Transaction ID: B147640	
Mailing Address 7185 Navajo Road Suite L		Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
City San Diego	State CA	Zip Code 92119	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement G-2006 State House 78 CA		011 Category/ Type	
Candidate Name Shirley Horton			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 78			

Full Name (Last, First, Middle Initial) C. Blakeslee for Assembly 2006 ID#1273981		Transaction ID: B147641	
Mailing Address P.O. Box 1565		Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
City Oakdale	State CA	Zip Code 95361	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement G-2006 State House 33 CA		011 Category/ Type	
Candidate Name Sam Blakeslee			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 33			

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Bass for Assembly 2006 ID# 1272594		Transaction ID: B147642 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 1100 O Street Suite 200		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95814	011 Category/ Type	
Purpose of Disbursement G-2006 State House 47 CA		
Candidate Name Karen Bass		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 47	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Richman for State Treasurer ID# 1263366		Transaction ID: B147643 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address P.O. Box 471		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95812	011 Category/ Type	
Purpose of Disbursement O-2006 State Treasurer CA		
Candidate Name Keith S. Richman		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Ret Primary	

Full Name (Last, First, Middle Initial) C. Ted Lieu for Assembly 2006 ID#1280888		Transaction ID: B147644 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 1100 O Street Suite 200		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95814	011 Category/ Type	
Purpose of Disbursement G-2006 State House 53 CA		
Candidate Name Ted Lieu		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 53	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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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

Full Name (Last, First, Middle Initial) A. Alberto Torrico for Asmbly '06 ID#1272675		Transaction ID: B147645	
Mailing Address 915 L Street Suite C-146		Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
City Sacramento	State CA	Zip Code 95814	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement G-2006 State House 20 CA		011 Category/ Type	
Candidate Name Alberto Torrico		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 20		

Full Name (Last, First, Middle Initial) B. Dave Albo for Delegate		Transaction ID: B145855	
Mailing Address 6350 Rolling Mill Place		Date of Disbursement MM / DD / YYYY 08 / 08 / 2006	
City Springfield	State VA	Zip Code 22152	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement P-2007 State House 42 VA		011 Category/ Type	
Candidate Name David Barr Albo		Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 42		

Full Name (Last, First, Middle Initial) C. Joe May for Delagate		Transaction ID: B145856	
Mailing Address P.O. Box 2146		Date of Disbursement MM / DD / YYYY 08 / 08 / 2006	
City Leesburg	State VA	Zip Code 20177	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement P-2007 State House 33 VA		011 Category/ Type	
Candidate Name Joe T May		Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 33		

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Friends of Harvey Morgan		Transaction ID: B145857 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address P.O. Box 949		Amount of Each Disbursement this Period 1000.00
City Gloucester	State VA Zip Code 23061	
Purpose of Disbursement P-2007 State House 98 VA		
Candidate Name Harvey Morgan		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011
State: VA District: 98		

Full Name (Last, First, Middle Initial) B. Friends of Tommy Norment		Transaction ID: B145858 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address P.O. Box 1697		Amount of Each Disbursement this Period 1000.00
City Williamsburg	State VA Zip Code 23187	
Purpose of Disbursement P-2007 State Senate 03 VA		
Candidate Name Thomas K Norment		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011
State: VA District: 03		

Full Name (Last, First, Middle Initial) C. Friends of Ken Stolle		Transaction ID: B145859 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 2101 Parks Avenue #700		Amount of Each Disbursement this Period 1000.00
City Virginia Beach	State VA Zip Code 23451	
Purpose of Disbursement P-2007 State Senate 08 VA		
Candidate Name Kenneth W Stolle		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011
State: VA District: 08		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Wampler for Senate		Transaction ID: B145860 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 510 Cumberland St. #308		Amount of Each Disbursement this Period 1000.00
City Bristol State VA Zip Code 24201	011 Category/ Type	
Purpose of Disbursement P-2007 State Senate 40 VA		
Candidate Name William C Wampler		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 40	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Leo Wardrup for Delegate		Transaction ID: B145862 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address P.O. Box 5266		Amount of Each Disbursement this Period 500.00
City Virginia Beach State VA Zip Code 23471	011 Category/ Type	
Purpose of Disbursement P-2007 State House 83 VA		
Candidate Name Leo C Wardrup		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 83	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Marty Williams for Senate		Transaction ID: B145864 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address P.O. Box 1096		Amount of Each Disbursement this Period 1000.00
City Newport News State VA Zip Code 23601	011 Category/ Type	
Purpose of Disbursement P-2007 State Senate 01 VA		
Candidate Name Marty Williams		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 01	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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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

Full Name (Last, First, Middle Initial) A. MIC-PAC		Transaction ID: B145871 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 6
Mailing Address 220 Madison St.		Amount of Each Disbursement this Period 1500.00
City Jefferson City State MO Zip Code 65101	Purpose of Disbursement O-2006 State Multi-cand. PAC MO Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Citizens to Elect Tom Cross		Transaction ID: B146770 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 825		Amount of Each Disbursement this Period 1000.00
City Plainfield State IL Zip Code 60544	Purpose of Disbursement G-2006 State House 84 IL Candidate Name Tom Cross Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 84 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Cmte for Frank J. Mautino		Transaction ID: B146771 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 108 W. Saint Paul St. Ste. B		Amount of Each Disbursement this Period 1500.00
City Spring Valley State IL Zip Code 61362	Purpose of Disbursement G-2006 State House 76 IL Candidate Name Frank J Mautino Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 76 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial) A. Friends of Mike Jacobs		Transaction ID: B146772 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 503 3rd Avenue		Amount of Each Disbursement this Period 1000.00
City Hampton State IL Zip Code 61256	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 36 IL		
Candidate Name Michael Jacobs		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 36	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens for Frank Watson		Transaction ID: B146773 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 1355 S. State Route 127		Amount of Each Disbursement this Period 500.00
City Greenville State IL Zip Code 62246	011 Category/ Type	
Purpose of Disbursement G-2006 State Senate 51 IL		
Candidate Name Frank C Watson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 51	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tony Mendoza for Assembly ID#1266727		Transaction ID: B145567 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 921 11th Street Suite 904		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95814	011 Category/ Type	
Purpose of Disbursement G-2006 State House 56 CA		
Candidate Name Anthony Mendoza		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 56	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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)

PAGE 313 / 314

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Nick Micozzie

Mailing Address P.O. Box 234

City Clifton Heights State PA Zip Code 19018

Purpose of Disbursement
G-2006 State House 163 PA

Candidate Name
Nicholas A Micozzie

Office Sought: House
 Senate
 President

State: PA District: 16

Disbursement For: 2006
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B145569

Date of Disbursement

08 / 01 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

36350.00

Form/Schedule: SA11A1

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.