

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

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

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 282

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burns, Gregory, C, ,

Mailing Address 2000 Broadmoor Ln

City
Vernon Hills

State
IL

Zip Code
60061-4564

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-HR-Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1327.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2019

Transaction ID : 201910289215-175

Amount of Each Receipt this Period

60.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cannon, Jessica, Dawn, ,

Mailing Address 10233 Ramblewood Dr

City
Lakeland

State
TN

Zip Code
38002-8549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-Territory Sales Leader-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 11 / 2019

Transaction ID : 201910149134-377

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cannon, Jessica, Dawn, ,

Mailing Address 10233 Ramblewood Dr

City
Lakeland

State
TN

Zip Code
38002-8549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-Territory Sales Leader-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2019

Transaction ID : 201910289215-380

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

100.35