

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

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

FOR LINE NUMBER: PAGE 43 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

A. Flynn, James, J, ,

Mailing Address 13 Meadow View Ln

City
MalvernState
PAZip Code
19355-3363FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

SVP-ABD-Field Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : 201904019134-458

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Fontana, Angela, K, ,

Mailing Address 1280 Wild Rose Ln

City
Lake ForestState
ILZip Code
60045-3656FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-L&R-Allstate Financial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 01 / 2019

Transaction ID : 2019030491318-34

Amount of Each Receipt this Period

58.00

☐ Memo Item

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

C. Fontana, Angela, K, ,

Mailing Address 1280 Wild Rose Ln

City
Lake ForestState
ILZip Code
60045-3656FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-L&R-Allstate Financial

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

406.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2019

Transaction ID : 201903189134-34

Amount of Each Receipt this Period

58.00

☐ Memo Item

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

308.30

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