

**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**

CITY

STATE

ZIP CODE

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

11

28

2006

through

12

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

01

22

2007

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

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	2	8	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		113864.78
(b) Cash on Hand at Beginning of Reporting Period	110885.10	
(c) Total Receipts (from Line 19)	29748.63	404879.99
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	140633.73	518744.77
7. Total Disbursements (from Line 31)	12681.91	390792.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	127951.82	127951.82
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

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

To:

M	M
1	2

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	27291.45	288462.65
(i) Itemized (use Schedule A)		
(ii) Unitemized	455.70	107908.92
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	27747.15	396371.57
(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) ➡	27747.15	396371.57
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)	2000.00	8500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.48	8.42
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))	29748.63	404879.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	29748.63	404879.99

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)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		181.91	2032.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡		181.91	2032.95
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		7000.00	142500.00
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.....		5500.00	246260.00
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))..		12681.91	390792.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		12681.91	390792.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	27747.15	396371.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27747.15	396371.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	181.91	2032.95
37. Offsets to Operating Expenditures (from Line 15, page 3)	2000.00	8500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-1818.09	-6467.05

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

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

FOR LINE NUMBER: PAGE 6 / 301

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. REBECCA A ABEL

Mailing Address 657 CORAL COURT

City State Zip Code
 LINDENHURST IL 60046

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 ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762787

Amount of Each Receipt this Period

21.80

Full Name (Last, First, Middle Initial)

B. REBECCA A ABEL

Mailing Address 657 CORAL COURT

City State Zip Code
 LINDENHURST IL 60046

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 ▼

566.80

Date of Receipt

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

Transaction ID: A2006-1941906

Amount of Each Receipt this Period

21.80

Full Name (Last, First, Middle Initial)

C. ERNEST D ADAMS

Mailing Address 33934 N TREELINE CT

City State Zip Code
 GAGES LAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.35

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762503

Amount of Each Receipt this Period

18.32

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 / 301

(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) ERNEST D ADAMS Mailing Address 33934 N TREELINE CT City GAGES LAKE State IL Zip Code 60030 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 ▼ 473.67			Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941624 Amount of Each Receipt this Period 18.32
B. Full Name (Last, First, Middle Initial) JONES G ADUKEH Mailing Address 1226 RIDGEWOOD LANE City LAKE VILLA State IL Zip Code 60046 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 ▼ 681.95			Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762705 Amount of Each Receipt this Period 27.69
C. Full Name (Last, First, Middle Initial) JONES G ADUKEH Mailing Address 1226 RIDGEWOOD LANE City LAKE VILLA State IL Zip Code 60046 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 ▼ 709.64			Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941825 Amount of Each Receipt this Period 27.69

SUBTOTAL of Receipts This Page (optional)

73.70

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 8 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LORAL ADUKEH
Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.70

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762772

Amount of Each Receipt this Period

30.10

B. Full Name (Last, First, Middle Initial)
LORAL ADUKEH
Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.80

Date of Receipt

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

Transaction ID: A2006-1941891

Amount of Each Receipt this Period

30.10

C. Full Name (Last, First, Middle Initial)
MICHAEL W AGAR
Mailing Address 200 W MILL VALLEY DR

City State Zip Code
COLLEYVILLE TX 76034

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 ▼

406.25

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762673

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

76.55

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 9 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL W AGAR
Mailing Address 200 W MILL VALLEY DR

City State Zip Code
COLLEYVILLE TX 76034

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 ▼

422.60

Date of Receipt

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

Transaction ID: A2006-1941793

Amount of Each Receipt this Period

16.35

B. Full Name (Last, First, Middle Initial)
ERIKA S AHERN
Mailing Address 143 EAST WOOD STREET

City State Zip Code
PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762380

Amount of Each Receipt this Period

21.82

C. Full Name (Last, First, Middle Initial)
ERIKA S AHERN
Mailing Address 143 EAST WOOD STREET

City State Zip Code
PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.62

Date of Receipt

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

Transaction ID: A2006-1941502

Amount of Each Receipt this Period

21.82

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: PAGE 10 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 PATRICIA A AITKEN
 Mailing Address 1245 CARIBOU LANE

City State Zip Code
 HOFFMAN ESTATES IL 60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.01

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762537

Amount of Each Receipt this Period

19.92

B. Full Name (Last, First, Middle Initial)
 PATRICIA A AITKEN
 Mailing Address 1245 CARIBOU LANE

City State Zip Code
 HOFFMAN ESTATES IL 60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.93

Date of Receipt

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

Transaction ID: A2006-1941657

Amount of Each Receipt this Period

19.92

C. Full Name (Last, First, Middle Initial)
 JOHN M ANDERSON
 Mailing Address 1432 S. 10TH ST.

City State Zip Code
 ST. CHARLES IL 60174

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Senior Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762674

Amount of Each Receipt this Period

11.40

SUBTOTAL of Receipts This Page (optional)

51.24

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: PAGE 11 / 301

(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 (Last, First, Middle Initial)

A. JOHN M ANDERSON

Mailing Address 1432 S. 10TH ST.

City State Zip Code
ST. CHARLES IL 60174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.70

Date of Receipt

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

Transaction ID: A2006-1941794

Amount of Each Receipt this Period

11.40

Full Name (Last, First, Middle Initial)

B. NANCY H ANDERSON

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.90

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762546

Amount of Each Receipt this Period

27.14

Full Name (Last, First, Middle Initial)

C. NANCY H ANDERSON

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.04

Date of Receipt

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

Transaction ID: A2006-1941666

Amount of Each Receipt this Period

27.14

SUBTOTAL of Receipts This Page (optional)

65.68

TOTAL This Period (last page this line 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 12 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
WILLIAM H AYO
Mailing Address 1009 LAKE RIDGE DR.

City State Zip Code
SAFETY HARBOR FL 34695

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762487

Amount of Each Receipt this Period

16.35

B. Full Name (Last, First, Middle Initial)
WILLIAM H AYO
Mailing Address 1009 LAKE RIDGE DR.

City State Zip Code
SAFETY HARBOR FL 34695

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.10

Date of Receipt

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

Transaction ID: A2006-1941608

Amount of Each Receipt this Period

16.35

C. Full Name (Last, First, Middle Initial)
JOHN P BADER
Mailing Address 438 MITCHELL DRIVE

City State Zip Code
GRAYS LAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Enterprise Infrastruct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1577.08

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762374

Amount of Each Receipt this Period

64.50

SUBTOTAL of Receipts This Page (optional)

97.20

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: PAGE 13 / 301

(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 (Last, First, Middle Initial)

A. JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City State Zip Code
 GRAYS LAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Enterprise Infrastruct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1641.58

Date of Receipt

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

Transaction ID: A2006-1941496

Amount of Each Receipt this Period

64.50

Full Name (Last, First, Middle Initial)

B. CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE N

City State Zip Code
 JACKSONVILLE FL 32224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.48

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762474

Amount of Each Receipt this Period

29.66

Full Name (Last, First, Middle Initial)

C. CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE N

City State Zip Code
 JACKSONVILLE FL 32224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.14

Date of Receipt

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

Transaction ID: A2006-1941596

Amount of Each Receipt this Period

29.66

SUBTOTAL of Receipts This Page (optional)

123.82

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: PAGE 14 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 DIANE G BAKER
 Mailing Address 120 EAST SHERIDAN RD

City State Zip Code
 LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP-PRODUCT OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1143.60

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762470

Amount of Each Receipt this Period

46.36

B. Full Name (Last, First, Middle Initial)
 DIANE G BAKER
 Mailing Address 120 EAST SHERIDAN RD

City State Zip Code
 LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP-PRODUCT OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1189.96

Date of Receipt

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

Transaction ID: A2006-1941592

Amount of Each Receipt this Period

46.36

C. Full Name (Last, First, Middle Initial)
 ROBERT Z BAKER
 Mailing Address 3012 THORNHILL DRIVE

City State Zip Code
 GRANITE BAY CA 95746

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 ▼

397.20

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762801

Amount of Each Receipt this Period

16.01

SUBTOTAL of Receipts This Page (optional)

108.73

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROBERT Z BAKER
 Mailing Address 3012 THORNHILL DRIVE

City State Zip Code
 GRANITE BAY CA 95746

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 ▼

413.21

Date of Receipt

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

Transaction ID: A2006-1941920

Amount of Each Receipt this Period

16.01

B. Full Name (Last, First, Middle Initial)
 ALEXANDRA BALATSOUKAS
 Mailing Address 992 WEEPING WAY LANE

City State Zip Code
 AVON IN 46123

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 ▼

224.55

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762676

Amount of Each Receipt this Period

24.95

C. Full Name (Last, First, Middle Initial)
 ALEXANDRA BALATSOUKAS
 Mailing Address 992 WEEPING WAY LANE

City State Zip Code
 AVON IN 46123

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 ▼

249.50

Date of Receipt

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

Transaction ID: A2006-1941796

Amount of Each Receipt this Period

24.95

SUBTOTAL of Receipts This Page (optional)

65.91

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 16 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GARRY J BALLEK
Mailing Address 1013 MASON LANE

City State Zip Code
LAKE IN THE HIL IL 60156

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Unclassified Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.05

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762603

Amount of Each Receipt this Period

18.80

B. Full Name (Last, First, Middle Initial)
GARRY J BALLEK
Mailing Address 1013 MASON LANE

City State Zip Code
LAKE IN THE HIL IL 60156

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Unclassified Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.85

Date of Receipt

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

Transaction ID: A2006-1941723

Amount of Each Receipt this Period

18.80

C. 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 CompanyOccupation
FVP President New Jersey

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.51

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762447

Amount of Each Receipt this Period

32.31

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: PAGE 17 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

838.82

Date of Receipt

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

Transaction ID: A2006-1941569

Amount of Each Receipt this Period

32.31

Full Name (Last, First, Middle Initial)

B. 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 ▼

1520.73

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762785

Amount of Each Receipt this Period

61.49

Full Name (Last, First, Middle Initial)

C. 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 ▼

1582.22

Date of Receipt

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

Transaction ID: A2006-1941904

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: PAGE 18 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

386.50

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762566

Amount of Each Receipt this Period

15.46

Full Name (Last, First, Middle Initial)

B. 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 ▼

401.96

Date of Receipt

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

Transaction ID: A2006-1941686

Amount of Each Receipt this Period

15.46

Full Name (Last, First, Middle Initial)

C. 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 ▼

588.45

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762512

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: PAGE 19 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID J 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 CompanyOccupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.17

Date of Receipt

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

Transaction ID: A2006-1941633

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 CompanyOccupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762392

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 CompanyOccupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.88

Date of Receipt

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

Transaction ID: A2006-1941514

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: PAGE 20 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CANDICE L BEINLICH
Mailing Address 1781 TUDOR LANE # 309

City State Zip Code
NORTHBROOK IL 60062

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 ▼

445.90

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762561

Amount of Each Receipt this Period

17.94

B. Full Name (Last, First, Middle Initial)
CANDICE L BEINLICH
Mailing Address 1781 TUDOR LANE # 309

City State Zip Code
NORTHBROOK IL 60062

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 ▼

463.84

Date of Receipt

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

Transaction ID: A2006-1941681

Amount of Each Receipt this Period

17.94

C. Full Name (Last, First, Middle Initial)
DIANE BELLAS
Mailing Address 632 Concord Way

City State Zip Code
Prospect Heights IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762568

Amount of Each Receipt this Period

23.31

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: PAGE 21 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 DIANE BELLAS
 Mailing Address 632 Concord Way

City State Zip Code
 Prospect Heights IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.71

Date of Receipt

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

Transaction ID: A2006-1941688

Amount of Each Receipt this Period

23.31

B. Full Name (Last, First, Middle Initial)
 WALTER A BERKOWICZ
 Mailing Address 405 GATESHEAD DRIVE

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

757.60

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762636

Amount of Each Receipt this Period

30.54

C. Full Name (Last, First, Middle Initial)
 WALTER A BERKOWICZ
 Mailing Address 405 GATESHEAD DRIVE

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.14

Date of Receipt

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

Transaction ID: A2006-1941756

Amount of Each Receipt this Period

30.54

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 22 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
 GLENCOE IL 60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP and President Broker D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

931.34

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762413

Amount of Each Receipt this Period

37.71

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

EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
 GLENCOE IL 60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP and President Broker D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.05

Date of Receipt

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

Transaction ID: A2006-1941535

Amount of Each Receipt this Period

37.71

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

DAVID G BIEMILLER

Mailing Address 480 LEES LAKE RD

City State Zip Code
 FAYETTEVILLE GA 30214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.15

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762488

Amount of Each Receipt this Period

18.63

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 23 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

Mailing Address 480 LEES LAKE RD

City State Zip Code
 FAYETTEVILLE GA 30214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.78

Date of Receipt

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

Transaction ID: A2006-1941609

Amount of Each Receipt this Period

18.63

B. Full Name (Last, First, Middle Initial)
DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City State Zip Code
 PONTE VEDRA BEA FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President-Allstate Workpl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.63

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762708

Amount of Each Receipt this Period

37.28

C. Full Name (Last, First, Middle Initial)
DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City State Zip Code
 PONTE VEDRA BEA FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President-Allstate Workpl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

962.91

Date of Receipt

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

Transaction ID: A2006-1941828

Amount of Each Receipt this Period

37.28

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: PAGE 24 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

ROBERT L BLOCK

Mailing Address 398 Brookmont Lane

City State Zip Code
 North Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1417.71

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762694

Amount of Each Receipt this Period

57.33

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

ROBERT L BLOCK

Mailing Address 398 Brookmont Lane

City State Zip Code
 North Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1475.04

Date of Receipt

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

Transaction ID: A2006-1941814

Amount of Each Receipt this Period

57.33

C. 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 ▼

1125.06

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762519

Amount of Each Receipt this Period

46.15

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 25 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

1171.21

Date of Receipt

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

Transaction ID: A2006-1941640

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 ▼

649.35

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762664

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 ▼

675.52

Date of Receipt

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

Transaction ID: A2006-1941784

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 26 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CAROL L BONOVICH
Mailing Address 6 N. MILLERS 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
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.10

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762625

Amount of Each Receipt this Period

15.86

B. Full Name (Last, First, Middle Initial)
CAROL L BONOVICH
Mailing Address 6 N. MILLERS 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
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.96

Date of Receipt

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

Transaction ID: A2006-1941745

Amount of Each Receipt this Period

15.86

C. Full Name (Last, First, Middle Initial)
DOUGLAS L BORG
Mailing Address 5550 Maybeck Ln

City State Zip Code
Livermore CA 94550

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 ▼

604.20

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762782

Amount of Each Receipt this Period

24.40

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: PAGE 27 / 301

(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 (Last, First, Middle Initial)

A. DOUGLAS L BORG

Mailing Address 5550 Maybeck Ln

City State Zip Code
 Livermore CA 94550

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 ▼

628.60

Date of Receipt

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

Transaction ID: A2006-1941901

Amount of Each Receipt this Period

24.40

Full Name (Last, First, Middle Initial)

B. MICHAEL B BOYLE

Mailing Address 1063 CHERRY STREET

City State Zip Code
 WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Info Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1760.20

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762451

Amount of Each Receipt this Period

71.08

Full Name (Last, First, Middle Initial)

C. MICHAEL B BOYLE

Mailing Address 1063 CHERRY STREET

City State Zip Code
 WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Info Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1831.28

Date of Receipt

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

Transaction ID: A2006-1941573

Amount of Each Receipt this Period

71.08

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: PAGE 28 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

RONALD 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 ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762730

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 ▼

358.88

Date of Receipt

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

Transaction ID: A2006-1941849

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 ▼

482.65

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762748

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 29 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

502.28

Date of Receipt

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

Transaction ID: A2006-1941867

Amount of Each Receipt this Period

19.63

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

KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code
IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.89

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762713

Amount of Each Receipt this Period

19.84

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

KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code
IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.73

Date of Receipt

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

Transaction ID: A2006-1941832

Amount of Each Receipt this Period

19.84

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: PAGE 30 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

477.05

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762590

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. 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 ▼

496.28

Date of Receipt

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

Transaction ID: A2006-1941710

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. 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 ▼

425.48

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762397

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: PAGE 31 / 301

(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. SHEILA M BREEDING

Full Name (Last, First, Middle Initial)

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 CompanyOccupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.83

Date of Receipt

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

Transaction ID: A2006-1941519

Amount of Each Receipt this Period

16.35

B. DUDLEY R BRIGHT

Full Name (Last, First, Middle Initial)

Mailing Address 18135 W MEANDER DR

City	State	Zip Code
GRAYSLAKE	IL	60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762434

Amount of Each Receipt this Period

17.49

C. DUDLEY R BRIGHT

Full Name (Last, First, Middle Initial)

Mailing Address 18135 W MEANDER DR

City	State	Zip Code
GRAYSLAKE	IL	60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.19

Date of Receipt

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

Transaction ID: A2006-1941556

Amount of Each Receipt this Period

17.49

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: PAGE 32 / 301

(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) SHAWN L BROADFIELD Mailing Address 1044 APPLE BLOSSOM COURT City State Zip Code LAKE ZURICH IL 60047 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Finance Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 922.60		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762577 Amount of Each Receipt this Period 37.19
B. Full Name (Last, First, Middle Initial) SHAWN L BROADFIELD Mailing Address 1044 APPLE BLOSSOM COURT City State Zip Code LAKE ZURICH IL 60047 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Finance Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 961.88		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941697 Amount of Each Receipt this Period 39.28
C. Full Name (Last, First, Middle Initial) DAVID C BROCK Mailing Address 305 CHURCHILL LANE City State Zip Code GURNEE IL 60031 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation CC IT Senior Planning Con Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 830.65		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762460 Amount of Each Receipt this Period 33.47

SUBTOTAL of Receipts This Page (optional)

109.94

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 33 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID C BROCK
Mailing Address 305 CHURCHILL LANE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Planning Con

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.12

Date of Receipt

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

Transaction ID: A2006-1941582

Amount of Each Receipt this Period

33.47

B. Full Name (Last, First, Middle Initial)
J D BROCK
Mailing Address 4958 DAY LILY WAY

City State Zip Code
ACWORTH GA 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 ▼

811.56

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762712

Amount of Each Receipt this Period

51.33

C. Full Name (Last, First, Middle Initial)
WILLIAM F BROKAW
Mailing Address 3 MILTON CT

City State Zip Code
CARY IL 60013

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 ▼

497.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762572

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

104.88

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: PAGE 34 / 301

(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 (Last, First, Middle Initial)

A. WILLIAM F BROKAW

Mailing Address 3 MILTON CT

City State Zip Code
 CARY IL 60013

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 ▼

516.88

Date of Receipt

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

Transaction ID: A2006-1941692

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

B. LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code
 FRANKLIN TN 37064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.10

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762463

Amount of Each Receipt this Period

16.62

Full Name (Last, First, Middle Initial)

C. LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code
 FRANKLIN TN 37064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.72

Date of Receipt

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

Transaction ID: A2006-1941585

Amount of Each Receipt this Period

16.62

SUBTOTAL of Receipts This Page (optional)

53.12

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: PAGE 35 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City State Zip Code
 CHICAGO IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.24

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762522

Amount of Each Receipt this Period

19.88

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

BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City State Zip Code
 CHICAGO IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.12

Date of Receipt

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

Transaction ID: A2006-1941643

Amount of Each Receipt this Period

19.88

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

MICHAEL E BROWN

Mailing Address 8739 CYPRESS RESERVE CIRCLE

City State Zip Code
 ORLANDO FL 32836

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 ▼

408.75

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762415

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

56.11

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 36 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL E BROWN

Mailing Address 8739 CYPRESS RESERVE CIRCLE

City	State	Zip Code
ORLANDO	FL	32836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Agency Consulting Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.10

Date of Receipt

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

Transaction ID: A2006-1941537

Amount of Each Receipt this Period

16.35

B. Full Name (Last, First, Middle Initial)
PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City	State	Zip Code
LONG GROVE	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762671

Amount of Each Receipt this Period

19.86

C. Full Name (Last, First, Middle Initial)
PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City	State	Zip Code
LONG GROVE	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.31

Date of Receipt

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

Transaction ID: A2006-1941791

Amount of Each Receipt this Period

19.86

SUBTOTAL of Receipts This Page (optional)

56.07

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 37 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICIA A BROWN

Mailing Address 9502 STONEY RIDGE ROAD

City State Zip Code
 SPRINGDALE MD 20774

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 ▼

307.20

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762446

Amount of Each Receipt this Period

12.36

B. Full Name (Last, First, Middle Initial)
PATRICIA A BROWN

Mailing Address 9502 STONEY RIDGE ROAD

City State Zip Code
 SPRINGDALE MD 20774

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 ▼

319.56

Date of Receipt

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

Transaction ID: A2006-1941568

Amount of Each Receipt this Period

12.36

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

Mailing Address 190 SAVANNA CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP & Chief Information O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3984.67

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762473

Amount of Each Receipt this Period

161.54

SUBTOTAL of Receipts This Page (optional)

186.26

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: PAGE 38 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CATHERINE S BRUNE
Mailing Address 190 SAVANNA CT

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP & Chief Information O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4146.21

Date of Receipt

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

Transaction ID: A2006-1941595

Amount of Each Receipt this Period

161.54

B. Full Name (Last, First, Middle Initial)
ANNE MARIE L BRUNNER
Mailing Address 2514 SOUTH WESLEY AVE

City State Zip Code
BERWYN IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.65

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762573

Amount of Each Receipt this Period

33.54

C. Full Name (Last, First, Middle Initial)
ANNE MARIE L BRUNNER
Mailing Address 2514 SOUTH WESLEY AVE

City State Zip Code
BERWYN IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

867.19

Date of Receipt

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

Transaction ID: A2006-1941693

Amount of Each Receipt this Period

33.54

SUBTOTAL of Receipts This Page (optional)

228.62

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: PAGE 39 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

809.82

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762761

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

B. 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 ▼

843.82

Date of Receipt

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

Transaction ID: A2006-1941880

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

C. 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 ▼

349.46

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762523

Amount of Each Receipt this Period

14.56

SUBTOTAL of Receipts This Page (optional)

82.56

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 40 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

364.02

Date of Receipt

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

Transaction ID: A2006-1941644

Amount of Each Receipt this Period

14.56

B. Full Name (Last, First, Middle Initial)
JOHN E BUCHANAN
Mailing Address 26 W. 690 LINDSEY AVE.

City State Zip Code
WINFIELD IL 60190

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.70

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762665

Amount of Each Receipt this Period

10.59

C. Full Name (Last, First, Middle Initial)
JOHN E BUCHANAN
Mailing Address 26 W. 690 LINDSEY AVE.

City State Zip Code
WINFIELD IL 60190

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.29

Date of Receipt

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

Transaction ID: A2006-1941785

Amount of Each Receipt this Period

10.59

SUBTOTAL of Receipts This Page (optional)

35.74

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: PAGE 41 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

Mailing Address 412 S. VAIL

City State Zip Code
 ARL HEIGHTS IL 60005

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 ▼

663.40

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762540

Amount of Each Receipt this Period

14.96

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

Mailing Address 412 S. VAIL

City State Zip Code
 ARL HEIGHTS IL 60005

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 ▼

678.36

Date of Receipt

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

Transaction ID: A2006-1941660

Amount of Each Receipt this Period

14.96

C. Full Name (Last, First, Middle Initial)
DAVID N BUGGS

Mailing Address 12234 85TH AVE

City State Zip Code
 PLEASANT PR WI 53158

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 ▼

795.50

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762695

Amount of Each Receipt this Period

31.82

SUBTOTAL of Receipts This Page (optional)

61.74

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: PAGE 42 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID N BUGGS
Mailing Address 12234 85TH AVE

City State Zip Code
PLEASANT PR WI 53158

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 ▼

827.32

Date of Receipt

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

Transaction ID: A2006-1941815

Amount of Each Receipt this Period

31.82

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 ▼

981.29

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762693

Amount of Each Receipt this Period

39.68

C. 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 ▼

1020.97

Date of Receipt

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

Transaction ID: A2006-1941813

Amount of Each Receipt this Period

39.68

SUBTOTAL of Receipts This Page (optional)

111.18

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: PAGE 43 / 301

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 335.91		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762427 Amount of Each Receipt this Period 14.04
B. 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 349.95		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941549 Amount of Each Receipt this Period 14.04
C. Full Name (Last, First, Middle Initial) GREGORY C BURNS Mailing Address 2000 N. BROADMOOR LANE City State Zip Code VERNON HILLS IL 60061 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Human Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 421.15		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762421 Amount of Each Receipt this Period 17.82

SUBTOTAL of Receipts This Page (optional)

45.90

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 44 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.97

Date of Receipt

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

Transaction ID: A2006-1941543

Amount of Each Receipt this Period

17.82

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 ▼

707.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762726

Amount of Each Receipt this Period

28.43

C. 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 ▼

735.43

Date of Receipt

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

Transaction ID: A2006-1941845

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

74.68

TOTAL This Period (last page this line 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 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

2074.30

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762358

Amount of Each Receipt this Period

83.91

B. 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 ▼

2158.21

Date of Receipt

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

Transaction ID: A2006-1941480

Amount of Each Receipt this Period

83.91

C. Full Name (Last, First, Middle Initial)
D C BUTLER III
Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
ALPHARETTA GA 30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1246.02

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762471

Amount of Each Receipt this Period

51.23

SUBTOTAL of Receipts This Page (optional)

219.05

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 46 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) D C BUTLER III Mailing Address 15430 WHITE COLUMNS DRIVE City State Zip Code ALPHARETTA GA 30004 FEC ID number of contributing federal political committee. C Name of Employer 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 ▼ 1297.25		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941593 Amount of Each Receipt this Period 51.23
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 447.22		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762689 Amount of Each Receipt this Period 17.91
C. Full Name (Last, First, Middle Initial) ALICE M BYRNE Mailing Address 4121 109TH STREET City State Zip Code PLEASANT PRAIRI WI 53158 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Assistant Field Vice Pres Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 465.13		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941809 Amount of Each Receipt this Period 17.91

SUBTOTAL of Receipts This Page (optional)

87.05

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 47 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RICHARD S CAIRNS
Mailing Address 2791 NE 9TH COURT

City State Zip Code
POMPAÑO 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 ▼

370.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762476

Amount of Each Receipt this Period

14.93

B. Full Name (Last, First, Middle Initial)
RICHARD S CAIRNS
Mailing Address 2791 NE 9TH COURT

City State Zip Code
POMPAÑO 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 ▼

385.33

Date of Receipt

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

Transaction ID: A2006-1941598

Amount of Each Receipt this Period

14.93

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 ▼

1433.14

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762677

Amount of Each Receipt this Period

57.81

SUBTOTAL of Receipts This Page (optional)

87.67

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: PAGE 48 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

1490.95

Date of Receipt

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

Transaction ID: A2006-1941797

Amount of Each Receipt this Period

57.81

Full Name (Last, First, Middle Initial)

B. JOHN M CANTWELL

Mailing Address 335 DEVON COURT

City State Zip Code
 GRAYSLAKE IL 60030

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 ▼

357.50

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762437

Amount of Each Receipt this Period

14.30

Full Name (Last, First, Middle Initial)

C. JOHN M CANTWELL

Mailing Address 335 DEVON COURT

City State Zip Code
 GRAYSLAKE IL 60030

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 ▼

371.80

Date of Receipt

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

Transaction ID: A2006-1941559

Amount of Each Receipt this Period

14.30

SUBTOTAL of Receipts This Page (optional)

86.41

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: PAGE 49 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KIMBERLY CARMICHAEL

Mailing Address 713 TORY LANE

City State Zip Code
PHOENIXVILLE PA 19460

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 ▼

370.95

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762477

Amount of Each Receipt this Period

14.91

B. Full Name (Last, First, Middle Initial)
EARL W CHANCE

Mailing Address 6974 WINTER RIDGE PLACE

City State Zip Code
CASTLE ROCK CO 80108

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 ▼

362.30

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762722

Amount of Each Receipt this Period

14.63

C. Full Name (Last, First, Middle Initial)
EARL W CHANCE

Mailing Address 6974 WINTER RIDGE PLACE

City State Zip Code
CASTLE ROCK CO 80108

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 ▼

376.93

Date of Receipt

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

Transaction ID: A2006-1941841

Amount of Each Receipt this Period

14.63

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: PAGE 50 / 301

(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. IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762704

Amount of Each Receipt this Period

20.32

Full Name (Last, First, Middle Initial)

B. IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.86

Date of Receipt

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

Transaction ID: A2006-1941824

Amount of Each Receipt this Period

20.32

Full Name (Last, First, Middle Initial)

C. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Communication Senior Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762645

Amount of Each Receipt this Period

15.11

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 / 301

(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. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Communication Senior Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.26

Date of Receipt

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

Transaction ID: A2006-1941765

Amount of Each Receipt this Period

15.11

Full Name (Last, First, Middle Initial)

B. SCOTT M CHRISTENSEN

Mailing Address 20713 LEXINGTON LANE

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

881.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762626

Amount of Each Receipt this Period

35.47

Full Name (Last, First, Middle Initial)

C. SCOTT M CHRISTENSEN

Mailing Address 20713 LEXINGTON LANE

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.07

Date of Receipt

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

Transaction ID: A2006-1941746

Amount of Each Receipt this Period

35.47

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: PAGE 52 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

357.90

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762711

Amount of Each Receipt this Period

14.44

B. 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 ▼

372.34

Date of Receipt

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

Transaction ID: A2006-1941831

Amount of Each Receipt this Period

14.44

C. Full Name (Last, First, Middle Initial)
EDWARD T CLARK
Mailing Address 2907 GLENARYE DR

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Marketing Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.90

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762653

Amount of Each Receipt this Period

17.00

SUBTOTAL of Receipts This Page (optional)

45.88

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: PAGE 53 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

438.90

Date of Receipt

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

Transaction ID: A2006-1941773

Amount of Each Receipt this Period

17.00

B. 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 ▼

1035.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762393

Amount of Each Receipt this Period

41.96

C. 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 ▼

1076.96

Date of Receipt

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

Transaction ID: A2006-1941515

Amount of Each Receipt this Period

41.96

SUBTOTAL of Receipts This Page (optional)

100.92

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 54 / 301

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 CompanyOccupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762511

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 CompanyOccupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

827.33

Date of Receipt

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

Transaction ID: A2006-1941632

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 CompanyOccupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

661.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762652

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: PAGE 55 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

Mailing Address 4667 TAMWORTH DR

City 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 ▼

688.36

Date of Receipt

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

Transaction ID: A2006-1941772

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 ▼

703.95

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762614

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 ▼

734.07

Date of Receipt

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

Transaction ID: A2006-1941734

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: PAGE 56 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
WILLIAM C COLE
Mailing Address 6796 LIVINGSTON DR.

City State Zip Code
HUNTINGTON BCH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762790

Amount of Each Receipt this Period

16.35

B. Full Name (Last, First, Middle Initial)
WILLIAM C COLE
Mailing Address 6796 LIVINGSTON DR.

City State Zip Code
HUNTINGTON BCH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.82

Date of Receipt

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

Transaction ID: A2006-1941909

Amount of Each Receipt this Period

37.07

C. Full Name (Last, First, Middle Initial)
EDWARD T COLLINS
Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.94

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762562

Amount of Each Receipt this Period

39.77

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWARD T COLLINS
Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1085.71

Date of Receipt

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

Transaction ID: A2006-1941682

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)
LARRY K CONLEE
Mailing Address 4516 LINSKOTT AVE

City State Zip Code
DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762600

Amount of Each Receipt this Period

15.51

C. Full Name (Last, First, Middle Initial)
LARRY K CONLEE
Mailing Address 4516 LINSKOTT AVE

City State Zip Code
DOWNERS GROVE IL 60515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.01

Date of Receipt

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

Transaction ID: A2006-1941720

Amount of Each Receipt this Period

15.51

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: PAGE 58 / 301

(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 (Last, First, Middle Initial)

A. JANET L CONNOLLY

Mailing Address 4618 LEGACY CT

City State Zip Code
 SARASOTA FL 34241

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
New Agency Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762490

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. JANET L CONNOLLY

Mailing Address 4618 LEGACY CT

City State Zip Code
 SARASOTA FL 34241

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
New Agency Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: A2006-1941611

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. MICHAEL P COOGAN

Mailing Address 1609 SYRACUSE LN.

City State Zip Code
 SCHAUMBURG IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762617

Amount of Each Receipt this Period

28.11

SUBTOTAL of Receipts This Page (optional)

48.11

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 59 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL P COOGAN
Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

726.41

Date of Receipt

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

Transaction ID: A2006-1941737

Amount of Each Receipt this Period

28.11

B. 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 ▼

1589.71

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762720

Amount of Each Receipt this Period

64.28

C. 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 ▼

1653.99

Date of Receipt

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

Transaction ID: A2006-1941839

Amount of Each Receipt this Period

64.28

SUBTOTAL of Receipts This Page (optional)

156.67

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: PAGE 60 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

491.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762395

Amount of Each Receipt this Period

19.69

Full Name (Last, First, Middle Initial)

B. 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 ▼

510.99

Date of Receipt

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

Transaction ID: A2006-1941517

Amount of Each Receipt this Period

19.69

Full Name (Last, First, Middle Initial)

C. WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City State Zip Code
 ARLINGTON HGTS IL 60005

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 ▼

1669.28

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762520

Amount of Each Receipt this Period

67.74

SUBTOTAL of Receipts This Page (optional)

107.12

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 301

(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 (Last, First, Middle Initial)

A. WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City State Zip Code
 ARLINGTON HGTS. IL 60005

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 ▼

1737.02

Date of Receipt

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

Transaction ID: A2006-1941641

Amount of Each Receipt this Period

67.74

Full Name (Last, First, Middle Initial)

B. FREDERICK F CRIPE

Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
GVP-Product Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1879.53

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762514

Amount of Each Receipt this Period

76.15

Full Name (Last, First, Middle Initial)

C. FREDERICK F CRIPE

Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
GVP-Product Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1955.68

Date of Receipt

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

Transaction ID: A2006-1941635

Amount of Each Receipt this Period

76.15

SUBTOTAL of Receipts This Page (optional)

220.04

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: PAGE 62 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RICHARD C CRIST JR
 Mailing Address 14 CARDINAL DRIVE

City State Zip Code
 PRINCETON JUNCT NJ 08550

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 ▼

1646.01

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762428

Amount of Each Receipt this Period

65.96

B. Full Name (Last, First, Middle Initial)
 RICHARD C CRIST JR
 Mailing Address 14 CARDINAL DRIVE

City State Zip Code
 PRINCETON JUNCT NJ 08550

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 ▼

1711.97

Date of Receipt

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

Transaction ID: A2006-1941550

Amount of Each Receipt this Period

65.96

C. Full Name (Last, First, Middle Initial)
 JOAN M CROCKETT
 Mailing Address 27 RIVER BEND CT

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2754.27

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762493

Amount of Each Receipt this Period

113.08

SUBTOTAL of Receipts This Page (optional)

245.00

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: PAGE 63 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOAN M CROCKETT

Mailing Address 27 RIVER BEND CT

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2867.35

Date of Receipt

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

Transaction ID: A2006-1941614

Amount of Each Receipt this Period

113.08

Full Name (Last, First, Middle Initial)

B. WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City State Zip Code
 BARRINGTON IL 60010

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 ▼

888.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762412

Amount of Each Receipt this Period

35.74

Full Name (Last, First, Middle Initial)

C. WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City State Zip Code
 BARRINGTON IL 60010

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 ▼

924.04

Date of Receipt

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

Transaction ID: A2006-1941534

Amount of Each Receipt this Period

35.74

SUBTOTAL of Receipts This Page (optional)

184.56

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 64 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

ROBERT W DANIELS

Mailing Address 1020 Pleasant Street #1

City State Zip Code
Oak Park IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.35

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762459

Amount of Each Receipt this Period

27.88

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

ROBERT W DANIELS

Mailing Address 1020 Pleasant Street #1

City State Zip Code
Oak Park IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.23

Date of Receipt

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

Transaction ID: A2006-1941581

Amount of Each Receipt this Period

27.88

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

SAM DE FRANK

Mailing Address 5 COURT OF HIDDEN WELLS

City State Zip Code
NORTHBROOK IL 60062

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 ▼

795.04

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762570

Amount of Each Receipt this Period

32.02

SUBTOTAL of Receipts This Page (optional)

87.78

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 65 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) SAM DE FRANK Mailing Address 5 COURT OF HIDDEN WELLS City NORTHBROOK State IL Zip Code 60062 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 ▼ 827.06		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941690 Amount of Each Receipt this Period 32.02
B. Full Name (Last, First, Middle Initial) PETER D DEBRECENY Mailing Address 1512 NORTH HOYNE AVE City CHICAGO State IL Zip Code 60622 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Vice President Corporate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1453.60		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762506 Amount of Each Receipt this Period 58.62
C. Full Name (Last, First, Middle Initial) PETER D DEBRECENY Mailing Address 1512 NORTH HOYNE AVE City CHICAGO State IL Zip Code 60622 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Vice President Corporate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1512.22		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941627 Amount of Each Receipt this Period 58.62

SUBTOTAL of Receipts This Page (optional)

149.26

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: PAGE 66 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

687.25

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762565

Amount of Each Receipt this Period

27.78

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 ▼

715.03

Date of Receipt

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

Transaction ID: A2006-1941685

Amount of Each Receipt this Period

27.78

C. 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 ▼

845.45

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762497

Amount of Each Receipt this Period

34.08

SUBTOTAL of Receipts This Page (optional)

89.64

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: PAGE 67 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

879.53

Date of Receipt

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

Transaction ID: A2006-1941618

Amount of Each Receipt this Period

34.08

Full Name (Last, First, Middle Initial)

B. 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 ▼

1226.91

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762668

Amount of Each Receipt this Period

49.74

Full Name (Last, First, Middle Initial)

C. 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 ▼

1276.65

Date of Receipt

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

Transaction ID: A2006-1941788

Amount of Each Receipt this Period

49.74

SUBTOTAL of Receipts This Page (optional)

133.56

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 68 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LORI A DESCH
Mailing Address 5 TREGONWELL COURT

City State Zip Code
ALGONQUIN IL 60102

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 ▼

713.87

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762486

Amount of Each Receipt this Period

29.31

B. Full Name (Last, First, Middle Initial)
LORI A DESCH
Mailing Address 5 TREGONWELL COURT

City State Zip Code
ALGONQUIN IL 60102

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 ▼

743.18

Date of Receipt

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

Transaction ID: A2006-1941607

Amount of Each Receipt this Period

29.31

C. 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 ▼

375.85

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762690

Amount of Each Receipt this Period

15.26

SUBTOTAL of Receipts This Page (optional)

73.88

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: PAGE 69 / 301

(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 BARRINGTON HILL State IL Zip Code 60102 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 ▼ 391.11		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1941810 Amount of Each Receipt this Period <table border="1"> <tr> <td>15.26</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	6	15.26
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		2	2		2	0	0	6														
15.26																							
B. Full Name (Last, First, Middle Initial) LEO DISHEL Mailing Address 340 E 74TH ST APT 6C City NEW YORK State NY Zip Code 10021 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 ▼ 489.90		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1762391 Amount of Each Receipt this Period <table border="1"> <tr> <td>19.71</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	6	19.71
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	8		2	0	0	6														
19.71																							
C. Full Name (Last, First, Middle Initial) LEO DISHEL Mailing Address 340 E 74TH ST APT 6C City NEW YORK State NY Zip Code 10021 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 ▼ 509.61		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1941513 Amount of Each Receipt this Period <table border="1"> <tr> <td>19.71</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	6	19.71
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		2	2		2	0	0	6														
19.71																							
SUBTOTAL of Receipts This Page (optional) ▶		<table border="1"> <tr> <td>54.68</td> </tr> </table>	54.68																				
54.68																							
TOTAL This Period (last page this line number only) ▶		<table border="1"> <tr> <td></td> </tr> </table>																					

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

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

FOR LINE NUMBER: PAGE 70 / 301

(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 (Last, First, Middle Initial)

A. SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Northbrook/Glenbrook

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1043.31

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762644

Amount of Each Receipt this Period

53.54

Full Name (Last, First, Middle Initial)

B. SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Northbrook/Glenbrook

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1096.85

Date of Receipt

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

Transaction ID: A2006-1941764

Amount of Each Receipt this Period

53.54

Full Name (Last, First, Middle Initial)

C. PHILIP J DORN

Mailing Address 12 SAINT JOHN DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Investor Relations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.85

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762767

Amount of Each Receipt this Period

19.87

SUBTOTAL of Receipts This Page (optional)

126.95

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: PAGE 71 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

Mailing Address 12 SAINT JOHN DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Investor Relations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.72

Date of Receipt

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

Transaction ID: A2006-1941886

Amount of Each Receipt this Period

19.87

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

Mailing Address 1706 ADLER LANE

City State Zip Code
MALVERN PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762432

Amount of Each Receipt this Period

19.41

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

Mailing Address 1706 ADLER LANE

City State Zip Code
MALVERN PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.91

Date of Receipt

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

Transaction ID: A2006-1941554

Amount of Each Receipt this Period

19.41

SUBTOTAL of Receipts This Page (optional)

58.69

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 72 / 301

(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 (Last, First, Middle Initial)

A. JAMES M DUDAS

Mailing Address 109 LORRAINE DRIVE

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.05

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762495

Amount of Each Receipt this Period

17.49

Full Name (Last, First, Middle Initial)

B. JAMES M DUDAS

Mailing Address 109 LORRAINE DRIVE

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.54

Date of Receipt

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

Transaction ID: A2006-1941616

Amount of Each Receipt this Period

17.49

Full Name (Last, First, Middle Initial)

C. TIMOTHY R DUGAN

Mailing Address 3220 SANDY LANE

City State Zip Code
 GLENVIEW IL 60025

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 ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762755

Amount of Each Receipt this Period

28.40

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: PAGE 73 / 301

(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 (Last, First, Middle Initial)

A. TIMOTHY R DUGAN

Mailing Address 3220 SANDY LANE

City State Zip Code
 GLENVIEW IL 60025

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 ▼

738.40

Date of Receipt

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

Transaction ID: A2006-1941874

Amount of Each Receipt this Period

28.40

Full Name (Last, First, Middle Initial)

B. WILLIAM F DULIN

Mailing Address 1301 NORMANDY CT

City State Zip Code
 SOUTHLAKE TX 76092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Education and Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.40

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762472

Amount of Each Receipt this Period

14.70

Full Name (Last, First, Middle Initial)

C. WILLIAM F DULIN

Mailing Address 1301 NORMANDY CT

City State Zip Code
 SOUTHLAKE TX 76092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Education and Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.10

Date of Receipt

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

Transaction ID: A2006-1941594

Amount of Each Receipt this Period

14.70

SUBTOTAL of Receipts This Page (optional)

57.80

TOTAL This Period (last page this line 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 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LAURA DUNNE
Mailing Address 1810 BALMORAL AVE

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Strategy Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.30

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762629

Amount of Each Receipt this Period

20.93

B. Full Name (Last, First, Middle Initial)
LAURA DUNNE
Mailing Address 1810 BALMORAL AVE

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Strategy Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.23

Date of Receipt

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

Transaction ID: A2006-1941749

Amount of Each Receipt this Period

20.93

C. Full Name (Last, First, Middle Initial)
DANIEL P DURBIN
Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

661.25

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762650

Amount of Each Receipt this Period

26.63

SUBTOTAL of Receipts This Page (optional)

68.49

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 75 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

DANIEL P DURBIN

Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
 ARLINGTON HTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.88

Date of Receipt

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

Transaction ID: A2006-1941770

Amount of Each Receipt this Period

26.63

B. 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 ▼

1024.65

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762414

Amount of Each Receipt this Period

41.35

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 ▼

1066.00

Date of Receipt

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

Transaction ID: A2006-1941536

Amount of Each Receipt this Period

41.35

SUBTOTAL of Receipts This Page (optional)

109.33

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 76 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
NINA B EIDELL
Mailing Address 25 E. Superior # 11B

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1510.05

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762364

Amount of Each Receipt this Period

61.06

B. Full Name (Last, First, Middle Initial)
NINA B EIDELL
Mailing Address 25 E. Superior # 11B

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1571.11

Date of Receipt

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

Transaction ID: A2006-1941486

Amount of Each Receipt this Period

61.06

C. Full Name (Last, First, Middle Initial)
PHILIP L EMMANUELE
Mailing Address 1085 FOREST HILL RD.

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Marketing Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1448.27

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762394

Amount of Each Receipt this Period

58.25

SUBTOTAL of Receipts This Page (optional)

180.37

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 PHILIP L EMMANUELE
 Mailing Address 1085 FOREST HILL RD.

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Marketing Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1506.52

Date of Receipt

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

Transaction ID: A2006-1941516

Amount of Each Receipt this Period

58.25

B. Full Name (Last, First, Middle Initial)
 KATHLEEN N ENRIGHT
 Mailing Address 10323 TRUMBULL AVE

City State Zip Code
 CHICAGO IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.20

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762658

Amount of Each Receipt this Period

33.61

C. Full Name (Last, First, Middle Initial)
 KATHLEEN N ENRIGHT
 Mailing Address 10323 TRUMBULL AVE

City State Zip Code
 CHICAGO IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

865.81

Date of Receipt

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

Transaction ID: A2006-1941778

Amount of Each Receipt this Period

33.61

SUBTOTAL of Receipts This Page (optional)

125.47

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 301

(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 (Last, First, Middle Initial)

A. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.87

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762375

Amount of Each Receipt this Period

48.44

Full Name (Last, First, Middle Initial)

B. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.31

Date of Receipt

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

Transaction ID: A2006-1941497

Amount of Each Receipt this Period

48.44

Full Name (Last, First, Middle Initial)

C. 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 ▼

740.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762584

Amount of Each Receipt this Period

29.83

SUBTOTAL of Receipts This Page (optional)

126.71

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 301

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 ▼

770.13

Date of Receipt

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

Transaction ID: A2006-1941704

Amount of Each Receipt this Period

29.83

B. 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 ▼

1000.90

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762410

Amount of Each Receipt this Period

40.47

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 ▼

1041.37

Date of Receipt

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

Transaction ID: A2006-1941532

Amount of Each Receipt this Period

40.47

SUBTOTAL of Receipts This Page (optional)

110.77

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 80 / 301

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DOROTHY EVEN

Mailing Address 1130 KEYSTONE AVENUE

City State Zip Code
RIVER FOREST IL 60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.02

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762560

Amount of Each Receipt this Period

78.81

B. Full Name (Last, First, Middle Initial)
DOROTHY EVEN

Mailing Address 1130 KEYSTONE AVENUE

City State Zip Code
RIVER FOREST IL 60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2028.83

Date of Receipt

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

Transaction ID: A2006-1941680

Amount of Each Receipt this Period

78.81

C. 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 ▼

651.64

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762431

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

186.05

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 81 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

680.07

Date of Receipt

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

Transaction ID: A2006-1941553

Amount of Each Receipt this Period

28.43

B. Full Name (Last, First, Middle Initial)
KATHRYN L FABYAN
Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762703

Amount of Each Receipt this Period

36.39

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 ▼

939.14

Date of Receipt

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

Transaction ID: A2006-1941823

Amount of Each Receipt this Period

36.39

SUBTOTAL of Receipts This Page (optional)

101.21

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GORDON S FALKNOR
Mailing Address 703 E CHERRY LN

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 Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762581

Amount of Each Receipt this Period

44.35

B. Full Name (Last, First, Middle Initial)
GORDON S FALKNOR
Mailing Address 703 E CHERRY LN

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 Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.15

Date of Receipt

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

Transaction ID: A2006-1941701

Amount of Each Receipt this Period

44.35

C. Full Name (Last, First, Middle Initial)
CAROLYN A FILIPOVIC
Mailing Address 918 JUNIPER ROAD

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.70

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762680

Amount of Each Receipt this Period

24.74

SUBTOTAL of Receipts This Page (optional)

113.44

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 83 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CAROLYN A FILIPOVIC
Mailing Address 918 JUNIPER ROAD

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.44

Date of Receipt

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

Transaction ID: A2006-1941800

Amount of Each Receipt this Period

24.74

B. Full Name (Last, First, Middle Initial)
STEVEN FINE
Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.87

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762418

Amount of Each Receipt this Period

23.91

C. Full Name (Last, First, Middle Initial)
STEVEN FINE
Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.78

Date of Receipt

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

Transaction ID: A2006-1941540

Amount of Each Receipt this Period

23.91

SUBTOTAL of Receipts This Page (optional)

72.56

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 84 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

662.79

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762552

Amount of Each Receipt this Period

26.87

Full Name (Last, First, Middle Initial)

B. 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 ▼

689.66

Date of Receipt

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

Transaction ID: A2006-1941672

Amount of Each Receipt this Period

26.87

Full Name (Last, First, Middle Initial)

C. KELLY F FOGARTY

Mailing Address 613 REX

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 ▼

884.04

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762576

Amount of Each Receipt this Period

35.65

SUBTOTAL of Receipts This Page (optional)

89.39

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KELLY F FOGARTY

Mailing Address 613 REX

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 ▼

919.69

Date of Receipt

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

Transaction ID: A2006-1941696

Amount of Each Receipt this Period

35.65

B. Full Name (Last, First, Middle Initial)
ANGELA K FONTANA

Mailing Address 1280 WILD ROSE 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
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.85

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762738

Amount of Each Receipt this Period

14.58

C. Full Name (Last, First, Middle Initial)
ANGELA K FONTANA

Mailing Address 1280 WILD ROSE 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
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.43

Date of Receipt

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

Transaction ID: A2006-1941857

Amount of Each Receipt this Period

14.58

SUBTOTAL of Receipts This Page (optional)

64.81

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 86 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAWN H FRASE
Mailing Address 24076 N. SHAGBARK

City State Zip Code
LAKE ZURICH IL 60047

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 ▼

443.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762643

Amount of Each Receipt this Period

17.89

B. Full Name (Last, First, Middle Initial)
DAWN H FRASE
Mailing Address 24076 N. SHAGBARK

City State Zip Code
LAKE ZURICH IL 60047

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 ▼

461.69

Date of Receipt

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

Transaction ID: A2006-1941763

Amount of Each Receipt this Period

17.89

C. Full Name (Last, First, Middle Initial)
PATRICIA W FRIDLEY
Mailing Address 945 Shermer Road

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1711.38

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762501

Amount of Each Receipt this Period

72.00

SUBTOTAL of Receipts This Page (optional)

107.78

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 87 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICIA W FRIDLEY
Mailing Address 945 Shermer Road

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1783.38

Date of Receipt

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

Transaction ID: A2006-1941622

Amount of Each Receipt this Period

72.00

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 ▼

358.81

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762596

Amount of Each Receipt this Period

15.68

C. 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 ▼

374.49

Date of Receipt

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

Transaction ID: A2006-1941716

Amount of Each Receipt this Period

15.68

SUBTOTAL of Receipts This Page (optional)

103.36

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 88 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

353.95

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762735

Amount of Each Receipt this Period

14.24

B. 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 ▼

368.19

Date of Receipt

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

Transaction ID: A2006-1941854

Amount of Each Receipt this Period

14.24

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 ▼

987.05

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762500

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

68.25

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: PAGE 89 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

1026.82

Date of Receipt

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

Transaction ID: A2006-1941621

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)
ANGELA FUSCO
Mailing Address 22255 MASHIE CT

City State Zip Code
IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.99

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762430

Amount of Each Receipt this Period

25.99

C. Full Name (Last, First, Middle Initial)
ANGELA FUSCO
Mailing Address 22255 MASHIE CT

City State Zip Code
IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

652.98

Date of Receipt

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

Transaction ID: A2006-1941552

Amount of Each Receipt this Period

25.99

SUBTOTAL of Receipts This Page (optional)

91.75

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 90 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
VINCENT A FUSCO
Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.56

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762373

Amount of Each Receipt this Period

21.38

B. Full Name (Last, First, Middle Initial)
VINCENT A FUSCO
Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

573.94

Date of Receipt

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

Transaction ID: A2006-1941495

Amount of Each Receipt this Period

21.38

C. Full Name (Last, First, Middle Initial)
DOUGLAS F GAER
Mailing Address 5610 SOUTH 88th STREET

City State Zip Code
LINCOLN NE 68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Nebraska Service Cent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762741

Amount of Each Receipt this Period

22.30

SUBTOTAL of Receipts This Page (optional)

65.06

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: PAGE 91 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DOUGLAS F GAER

Mailing Address 5610 SOUTH 88th STREET

City State Zip Code
LINCOLN NE 68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Nebraska Service Cent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.80

Date of Receipt

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

Transaction ID: A2006-1941860

Amount of Each Receipt this Period

22.30

B. Full Name (Last, First, Middle Initial)
PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

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 & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1396.08

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762435

Amount of Each Receipt this Period

56.49

C. Full Name (Last, First, Middle Initial)
PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

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 & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1452.57

Date of Receipt

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

Transaction ID: A2006-1941557

Amount of Each Receipt this Period

56.49

SUBTOTAL of Receipts This Page (optional)

135.28

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: PAGE 92 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KAREN C GARDNER
Mailing Address 1434 BAFFIN ROAD

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1623.87

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762739

Amount of Each Receipt this Period

65.75

B. Full Name (Last, First, Middle Initial)
KAREN C GARDNER
Mailing Address 1434 BAFFIN ROAD

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1689.62

Date of Receipt

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

Transaction ID: A2006-1941858

Amount of Each Receipt this Period

65.75

C. Full Name (Last, First, Middle Initial)
JOSEPH E GARNETT
Mailing Address 507 OLD WALNUT CIRCLE

City State Zip Code
GURNEE IL 60031

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 ▼

457.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762379

Amount of Each Receipt this Period

18.42

SUBTOTAL of Receipts This Page (optional)

149.92

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 93 / 301

(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 (Last, First, Middle Initial)

A. JOSEPH E GARNETT

Mailing Address 507 OLD WALNUT CIRCLE

City State Zip Code
 GURNEE IL 60031

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 ▼

475.82

Date of Receipt

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

Transaction ID: A2006-1941501

Amount of Each Receipt this Period

18.42

Full Name (Last, First, Middle Initial)

B. LYNN A GEHANT

Mailing Address 23W650 WOODWORTH PLACE

City State Zip Code
 ROSELLE IL 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 ▼

869.80

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762585

Amount of Each Receipt this Period

34.85

Full Name (Last, First, Middle Initial)

C. LYNN A GEHANT

Mailing Address 23W650 WOODWORTH PLACE

City State Zip Code
 ROSELLE IL 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 ▼

904.65

Date of Receipt

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

Transaction ID: A2006-1941705

Amount of Each Receipt this Period

34.85

SUBTOTAL of Receipts This Page (optional)

88.12

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: PAGE 94 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

NICK GEORGAKOPOULOS

Mailing Address 1846 N. HALSTED ST. #2

City State Zip Code
 CHICAGO IL 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 ▼

356.15

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762608

Amount of Each Receipt this Period

14.41

B.

Full Name (Last, First, Middle Initial)

NICK GEORGAKOPOULOS

Mailing Address 1846 N. HALSTED ST. #2

City State Zip Code
 CHICAGO IL 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 ▼

370.56

Date of Receipt

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

Transaction ID: A2006-1941728

Amount of Each Receipt this Period

14.41

C.

Full Name (Last, First, Middle Initial)

BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
 HOFFMAN ESTATES IL 60195

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.34

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762740

Amount of Each Receipt this Period

29.45

SUBTOTAL of Receipts This Page (optional)

58.27

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: PAGE 95 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 BONNIE S GILL
 Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
 HOFFMAN ESTATES IL 60195

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

737.79

Date of Receipt

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

Transaction ID: A2006-1941859

Amount of Each Receipt this Period

29.45

B. Full Name (Last, First, Middle Initial)
 JOAN GILMORE
 Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.82

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762376

Amount of Each Receipt this Period

39.77

C. Full Name (Last, First, Middle Initial)
 JOAN GILMORE
 Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1085.59

Date of Receipt

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

Transaction ID: A2006-1941498

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional) ▶

108.99

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 96 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

DEBORAH C GIVENS

Mailing Address 4370 MILNER ROAD WEST

City State Zip Code
 BIRMINGHAM AL 35242

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 ▼

911.38

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762710

Amount of Each Receipt this Period

41.50

B.

Full Name (Last, First, Middle Initial)

DEBORAH C GIVENS

Mailing Address 4370 MILNER ROAD WEST

City State Zip Code
 BIRMINGHAM AL 35242

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 ▼

952.88

Date of Receipt

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

Transaction ID: A2006-1941830

Amount of Each Receipt this Period

41.50

C.

Full Name (Last, First, Middle Initial)

MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1692.47

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762623

Amount of Each Receipt this Period

68.34

SUBTOTAL of Receipts This Page (optional)

151.34

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: PAGE 97 / 301

(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 (Last, First, Middle Initial)

A. MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1760.81

Date of Receipt

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

Transaction ID: A2006-1941743

Amount of Each Receipt this Period

68.34

Full Name (Last, First, Middle Initial)

B. ROBERT J GLOD

Mailing Address 1016 N. DERBYSHIRE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.20

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762559

Amount of Each Receipt this Period

18.35

Full Name (Last, First, Middle Initial)

C. ROBERT J GLOD

Mailing Address 1016 N. DERBYSHIRE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.55

Date of Receipt

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

Transaction ID: A2006-1941679

Amount of Each Receipt this Period

18.35

SUBTOTAL of Receipts This Page (optional)

105.04

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 301

(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 (Last, First, Middle Initial)

A. WILLIAM T GOFF

Mailing Address 124 FLEETS COVE ROAD

City State Zip Code
HUNTINGTON NY 11743

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 ▼

425.74

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762377

Amount of Each Receipt this Period

16.35

Full Name (Last, First, Middle Initial)

B. WILLIAM T GOFF

Mailing Address 124 FLEETS COVE ROAD

City State Zip Code
HUNTINGTON NY 11743

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 ▼

442.09

Date of Receipt

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

Transaction ID: A2006-1941499

Amount of Each Receipt this Period

16.35

Full Name (Last, First, Middle Initial)

C. BARBARA H GOHR

Mailing Address 1601 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Administrative Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.93

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762485

Amount of Each Receipt this Period

25.98

SUBTOTAL of Receipts This Page (optional)

58.68

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 301

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BARBARA H GOHR
Mailing Address 1601 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Administrative Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

671.91

Date of Receipt

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

Transaction ID: A2006-1941606

Amount of Each Receipt this Period

25.98

B. Full Name (Last, First, Middle Initial)
BRUCE R GOLDBERG
Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.83

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762544

Amount of Each Receipt this Period

19.88

C. Full Name (Last, First, Middle Initial)
BRUCE R GOLDBERG
Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.71

Date of Receipt

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

Transaction ID: A2006-1941664

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

65.74

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 301

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DENNIS C GOMEZ

Mailing Address 3 ROBERT COURT

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.60

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762407

Amount of Each Receipt this Period

9.35

Full Name (Last, First, Middle Initial)

B. DENNIS C GOMEZ

Mailing Address 3 ROBERT COURT

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.95

Date of Receipt

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

Transaction ID: A2006-1941529

Amount of Each Receipt this Period

9.35

Full Name (Last, First, Middle Initial)

C. ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.45

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762797

Amount of Each Receipt this Period

30.47

SUBTOTAL of Receipts This Page (optional)

49.17

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 301

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ANN A GOULD
Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.92

Date of Receipt

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

Transaction ID: A2006-1941916

Amount of Each Receipt this Period

30.47

B. Full Name (Last, First, Middle Initial)
KEVIN P GOW
Mailing Address 4 HAMPTON LANE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP AGENCY & CUSTOMER SUPP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.43

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762360

Amount of Each Receipt this Period

25.35

C. Full Name (Last, First, Middle Initial)
KEVIN P GOW
Mailing Address 4 HAMPTON LANE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP AGENCY & CUSTOMER SUPP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

628.78

Date of Receipt

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

Transaction ID: A2006-1941482

Amount of Each Receipt this Period

25.35

SUBTOTAL of Receipts This Page (optional)

81.17

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 301

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GEORGE F GRAWE

Mailing Address 18799 GUNN HIGHWAY

City State Zip Code
 ODESSA FL 33556

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.60

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762482

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

B. GEORGE F GRAWE

Mailing Address 18799 GUNN HIGHWAY

City State Zip Code
 ODESSA FL 33556

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.48

Date of Receipt

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

Transaction ID: A2006-1941603

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

C. PAMELA P GRAY

Mailing Address 50 E. BELLEVUE PL. #2402

City State Zip Code
 CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Data Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.50

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762715

Amount of Each Receipt this Period

24.24

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PAMELA P GRAY

Mailing Address 50 E. BELLEVUE PL. #2402

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Data Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.74

Date of Receipt

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

Transaction ID: A2006-1941834

Amount of Each Receipt this Period

24.24

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

Mailing Address 948 NORTH EUCLID AVENUE

City State Zip Code
OAK PARK IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.73

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762505

Amount of Each Receipt this Period

37.96

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

Mailing Address 948 NORTH EUCLID AVENUE

City State Zip Code
OAK PARK IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.69

Date of Receipt

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

Transaction ID: A2006-1941626

Amount of Each Receipt this Period

37.96

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: PAGE 104 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 MARK A GRELLA
 Mailing Address 1210 HADLEIGH DRIVE

City State Zip Code
 WEST CHESTER PA 19380

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 ▼

1153.78

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762405

Amount of Each Receipt this Period

46.28

B. Full Name (Last, First, Middle Initial)
 MARK A GRELLA
 Mailing Address 1210 HADLEIGH DRIVE

City State Zip Code
 WEST CHESTER PA 19380

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 ▼

1200.06

Date of Receipt

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

Transaction ID: A2006-1941527

Amount of Each Receipt this Period

46.28

C. Full Name (Last, First, Middle Initial)
 MARYLIN H GROOM
 Mailing Address 170 ASPINWALL STREET

City State Zip Code
 WESTBURY NY 11590

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 ▼

376.05

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762396

Amount of Each Receipt this Period

16.35

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: PAGE 105 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARYLIN H GROOM
Mailing Address 170 ASPINWALL STREET

City State Zip Code
WESTBURY NY 11590

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 ▼

392.40

Date of Receipt

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

Transaction ID: A2006-1941518

Amount of Each Receipt this Period

16.35

B. Full Name (Last, First, Middle Initial)
GREGORY J GUIDOS
Mailing Address 804 QUEENS HARBOR BLVD

City State Zip Code
JACKSONVILLE FL 32225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance AFW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.67

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762679

Amount of Each Receipt this Period

21.04

C. Full Name (Last, First, Middle Initial)
GREGORY J GUIDOS
Mailing Address 804 QUEENS HARBOR BLVD

City State Zip Code
JACKSONVILLE FL 32225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance AFW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.71

Date of Receipt

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

Transaction ID: A2006-1941799

Amount of Each Receipt this Period

21.04

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)
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FOR LINE NUMBER: PAGE 106 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. 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 ▼

447.15

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762771

Amount of Each Receipt this Period

18.00

Full Name (Last, First, Middle Initial)

B. 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 ▼

465.15

Date of Receipt

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

Transaction ID: A2006-1941890

Amount of Each Receipt this Period

18.00

Full Name (Last, First, Middle Initial)

C. 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 ▼

646.60

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762793

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: PAGE 107 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

672.64

Date of Receipt

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

Transaction ID: A2006-1941912

Amount of Each Receipt this Period

26.04

B. Full Name (Last, First, Middle Initial)
JAMES W HAIDU
Mailing Address 3 South Wynstone

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ivantage AVP Specialty Li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1253.14

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762633

Amount of Each Receipt this Period

50.61

C. Full Name (Last, First, Middle Initial)
JAMES W HAIDU
Mailing Address 3 South Wynstone

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ivantage AVP Specialty Li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1303.75

Date of Receipt

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

Transaction ID: A2006-1941753

Amount of Each Receipt this Period

50.61

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: PAGE 108 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROBERT F HAIR
 Mailing Address 17 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.95

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762798

Amount of Each Receipt this Period

24.96

B. Full Name (Last, First, Middle Initial)
 ROBERT F HAIR
 Mailing Address 17 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.91

Date of Receipt

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

Transaction ID: A2006-1941917

Amount of Each Receipt this Period

24.96

C. 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 ▼

3351.01

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762702

Amount of Each Receipt this Period

135.46

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: PAGE 109 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

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 ▼

3486.47

Date of Receipt

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

Transaction ID: A2006-1941822

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 ▼

429.75

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762657

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 ▼

446.94

Date of Receipt

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

Transaction ID: A2006-1941777

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 110 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RANDALL M HANSON
 Mailing Address 840 ALLEGHANY

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

737.75

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762749

Amount of Each Receipt this Period

29.74

B. Full Name (Last, First, Middle Initial)
 RANDALL M HANSON
 Mailing Address 840 ALLEGHANY

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.49

Date of Receipt

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

Transaction ID: A2006-1941868

Amount of Each Receipt this Period

29.74

C. Full Name (Last, First, Middle Initial)
 MICHAEL L HARRISON
 Mailing Address 1141 WINNERS CIRCLE

City State Zip Code
 LIBERTYVILLE IL 60048

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 ▼

3309.45

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762803

Amount of Each Receipt this Period

132.55

SUBTOTAL of Receipts This Page (optional)

192.03

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 111 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL L HARRISON
Mailing Address 1141 WINNERS CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼

3442.00

Date of Receipt

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

Transaction ID: A2006-1941922

Amount of Each Receipt this Period

132.55

B. Full Name (Last, First, Middle Initial)
FREDRICH A HATCH
Mailing Address 8313 STRATHMORE LANE

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 ▼

408.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762768

Amount of Each Receipt this Period

16.35

C. Full Name (Last, First, Middle Initial)
FREDRICH A HATCH
Mailing Address 8313 STRATHMORE LANE

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 ▼

425.10

Date of Receipt

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

Transaction ID: A2006-1941887

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

165.25

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: PAGE 112 / 301

(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) 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 372.24		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1762498 Amount of Each Receipt this Period <table border="1"> <tr> <td>15.08</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	6	15.08
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	8		2	0	0	6														
15.08																							
B. Full Name (Last, First, Middle Initial) KEITH A HAUSCHILDT Mailing Address 636 ROSEDALE AVE City ROSELLE State IL Zip Code 60172 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP AF Operations & Techn Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 387.32		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1941619 Amount of Each Receipt this Period <table border="1"> <tr> <td>15.08</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	6	15.08
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		2	2		2	0	0	6														
15.08																							
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1550.63		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1762496 Amount of Each Receipt this Period <table border="1"> <tr> <td>62.70</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	6	62.70
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	8		2	0	0	6														
62.70																							

SUBTOTAL of Receipts This Page (optional)

92.86

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 113 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) DANIEL J HEBEL Mailing Address 28365 West Big Hollow Road City State Zip Code Ingleside IL 60041 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 ▼ 1613.33		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941617 Amount of Each Receipt this Period 62.70
B. Full Name (Last, First, Middle Initial) RICHARD J HENEBERRY Mailing Address 23 CLAYTON City State Zip Code LAKE VILLA IL 60046 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP Intract Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 574.52		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762524 Amount of Each Receipt this Period 23.23
C. Full Name (Last, First, Middle Initial) RICHARD J HENEBERRY Mailing Address 23 CLAYTON City State Zip Code LAKE VILLA IL 60046 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP Intract Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 597.75		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941645 Amount of Each Receipt this Period 23.23

SUBTOTAL of Receipts This Page (optional)

109.16

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: PAGE 114 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

ROBERT 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 ▼

704.35

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762707

Amount of Each Receipt this Period

28.42

B. 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 ▼

732.77

Date of Receipt

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

Transaction ID: A2006-1941827

Amount of Each Receipt this Period

28.42

C. 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 ▼

340.70

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762448

Amount of Each Receipt this Period

13.76

SUBTOTAL of Receipts This Page (optional)

70.60

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 115 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

354.46

Date of Receipt

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

Transaction ID: A2006-1941570

Amount of Each Receipt this Period

13.76

B. Full Name (Last, First, Middle Initial)
WILLIAM G HILL
Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1734.26

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762458

Amount of Each Receipt this Period

77.28

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 ▼

1811.54

Date of Receipt

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

Transaction ID: A2006-1941580

Amount of Each Receipt this Period

77.28

SUBTOTAL of Receipts This Page (optional)

168.32

TOTAL This Period (last page this line 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 116 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.65

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762613

Amount of Each Receipt this Period

15.00

B. Full Name (Last, First, Middle Initial)
SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.65

Date of Receipt

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

Transaction ID: A2006-1941733

Amount of Each Receipt this Period

15.00

C. Full Name (Last, First, Middle Initial)
MERRILD A HOOVER

Mailing Address 49 DORAL STREET

City State Zip Code
HURRICANE WV 25526

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 ▼

561.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762462

Amount of Each Receipt this Period

22.46

SUBTOTAL of Receipts This Page (optional)

52.46

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 117 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MERRILD A HOOVER

Mailing Address 49 DORAL STREET

City State Zip Code
HURRICANE WV 25526

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 ▼

583.96

Date of Receipt

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

Transaction ID: A2006-1941584

Amount of Each Receipt this Period

22.46

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 ▼

494.45

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762698

Amount of Each Receipt this Period

19.88

C. 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 ▼

514.33

Date of Receipt

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

Transaction ID: A2006-1941818

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

62.22

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 118 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL 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 ▼

349.60

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762439

Amount of Each Receipt this Period

14.08

B. 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 ▼

363.68

Date of Receipt

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

Transaction ID: A2006-1941561

Amount of Each Receipt this Period

14.08

C. Full Name (Last, First, Middle Initial)
STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.04

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762610

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

67.93

TOTAL This Period (last page this line 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 119 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1045.58

Date of Receipt

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

Transaction ID: A2006-1941730

Amount of Each Receipt this Period

44.54

B.

Full Name (Last, First, Middle Initial)

KENNETH A IRVIN

Mailing Address 6352 CRAGIE HILL CT

City

DUBLIN

State

OH

Zip Code

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 ▼

387.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762436

Amount of Each Receipt this Period

15.50

C.

Full Name (Last, First, Middle Initial)

KENNETH A IRVIN

Mailing Address 6352 CRAGIE HILL CT

City

DUBLIN

State

OH

Zip Code

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 ▼

403.00

Date of Receipt

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

Transaction ID: A2006-1941558

Amount of Each Receipt this Period

15.50

SUBTOTAL of Receipts This Page (optional)

75.54

TOTAL This Period (last page this line 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 120 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

652.35

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762569

Amount of Each Receipt this Period

26.27

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

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code
CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sourcing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.62

Date of Receipt

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

Transaction ID: A2006-1941689

Amount of Each Receipt this Period

26.27

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

Mailing Address 226 Maison Court

City State Zip Code
Altamonte Springs FL 32714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762758

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

72.42

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BOB A JACKSON
Mailing Address 226 Maison Court

City State Zip Code
Altamonte Springs FL 32714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.88

Date of Receipt

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

Transaction ID: A2006-1941877

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)
JAMES C JAMIESON
Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
F&P/Enterprise Risk Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

757.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762538

Amount of Each Receipt this Period

30.52

C. Full Name (Last, First, Middle Initial)
JAMES C JAMIESON
Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
F&P/Enterprise Risk Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.27

Date of Receipt

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

Transaction ID: A2006-1941658

Amount of Each Receipt this Period

30.52

SUBTOTAL of Receipts This Page (optional)

80.92

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LINDA K JANCIAK
Mailing Address 479 FLOCK AVENUE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.76

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762773

Amount of Each Receipt this Period

12.60

B. Full Name (Last, First, Middle Initial)
LINDA K JANCIAK
Mailing Address 479 FLOCK AVENUE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.36

Date of Receipt

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

Transaction ID: A2006-1941892

Amount of Each Receipt this Period

12.60

C. Full Name (Last, First, Middle Initial)
BRIAN C JOHNSON
Mailing Address 312 GENEVA AVE

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.23

Date of Receipt

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

Transaction ID: A2006-1941719

Amount of Each Receipt this Period

8.03

SUBTOTAL of Receipts This Page (optional)

33.23

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 123 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LARRY D JOHNSON

Mailing Address 21943 W VERNON RIDGE DRIVE

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Catastrophe Managemen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1291.86

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762518

Amount of Each Receipt this Period

51.96

B. Full Name (Last, First, Middle Initial)
LARRY D JOHNSON

Mailing Address 21943 W VERNON RIDGE DRIVE

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Catastrophe Managemen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1343.82

Date of Receipt

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

Transaction ID: A2006-1941639

Amount of Each Receipt this Period

51.96

C. Full Name (Last, First, Middle Initial)
RONALD JOHNSON

Mailing Address 1726 R.F.D

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Allstate Force Develo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.04

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762753

Amount of Each Receipt this Period

14.39

SUBTOTAL of Receipts This Page (optional)

118.31

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 124 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

RONALD JOHNSON

Mailing Address 1726 R.F.D

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Allstate Force Develo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.43

Date of Receipt

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

Transaction ID: A2006-1941872

Amount of Each Receipt this Period

14.39

B. 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 ▼

382.19

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762461

Amount of Each Receipt this Period

15.57

C. 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 ▼

397.76

Date of Receipt

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

Transaction ID: A2006-1941583

Amount of Each Receipt this Period

15.57

SUBTOTAL of Receipts This Page (optional)

45.53

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: PAGE 125 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

1008.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762597

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

B. 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 ▼

1047.77

Date of Receipt

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

Transaction ID: A2006-1941717

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

C. JOHN A KANE

Mailing Address 1 LONGLEY PLACE

City State Zip Code
 HUNTINGTON STA NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.75

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762381

Amount of Each Receipt this Period

16.31

SUBTOTAL of Receipts This Page (optional)

95.85

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 126 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

Mailing Address 1 LONGLEY PLACE

City State Zip Code
HUNTINGTON STA NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.06

Date of Receipt

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

Transaction ID: A2006-1941503

Amount of Each Receipt this Period

16.31

B. 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 ▼

365.52

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762688

Amount of Each Receipt this Period

15.23

C. 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 ▼

380.75

Date of Receipt

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

Transaction ID: A2006-1941808

Amount of Each Receipt this Period

15.23

SUBTOTAL of Receipts This Page (optional)

46.77

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 127 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

1855.78

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762764

Amount of Each Receipt this Period

74.64

Full Name (Last, First, Middle Initial)

B. 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 ▼

1930.42

Date of Receipt

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

Transaction ID: A2006-1941883

Amount of Each Receipt this Period

74.64

Full Name (Last, First, Middle Initial)

C. MARY KEITH

Mailing Address 2309 RFD

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.60

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762792

Amount of Each Receipt this Period

16.60

SUBTOTAL of Receipts This Page (optional)

165.88

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: PAGE 128 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

MARY KEITH

Mailing Address 2309 RFD

City

LONG GROVE

State

IL

Zip Code

60047

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 ▼

429.20

Date of Receipt

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

Transaction ID: A2006-1941911

Amount of Each Receipt this Period

16.60

B.

Full Name (Last, First, Middle Initial)

TERRY KELAHER

Mailing Address 924 W. CHESTERFIELD CT.

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & General

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1939.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762607

Amount of Each Receipt this Period

78.13

C.

Full Name (Last, First, Middle Initial)

TERRY KELAHER

Mailing Address 924 W. CHESTERFIELD CT.

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & General

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2017.52

Date of Receipt

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

Transaction ID: A2006-1941727

Amount of Each Receipt this Period

78.13

SUBTOTAL of Receipts This Page (optional)

172.86

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 129 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID E KENNEY

Mailing Address 622 SEDGWICK DR.

City	State	Zip Code
LIBERTYVILLE	IL	60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762634

Amount of Each Receipt this Period

19.43

B. Full Name (Last, First, Middle Initial)
DAVID E KENNEY

Mailing Address 622 SEDGWICK DR.

City	State	Zip Code
LIBERTYVILLE	IL	60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.88

Date of Receipt

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

Transaction ID: A2006-1941754

Amount of Each Receipt this Period

19.43

C. Full Name (Last, First, Middle Initial)
JOSEPH A KENNY

Mailing Address 194 PEREGRINE LANE

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Actuary and Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762588

Amount of Each Receipt this Period

14.29

SUBTOTAL of Receipts This Page (optional)

53.15

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: PAGE 130 / 301

(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 (Last, First, Middle Initial)

A. JOSEPH A KENNY

Mailing Address 194 PEREGRINE LANE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Actuary and Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.54

Date of Receipt

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

Transaction ID: A2006-1941708

Amount of Each Receipt this Period

14.29

Full Name (Last, First, Middle Initial)

B. DARON K KERSTEN

Mailing Address 548 TIMBER RIDGE DR

City State Zip Code
 LONGWOOD FL 32779

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 ▼

221.90

Date of Receipt

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

Transaction ID: A2006-1941599

Amount of Each Receipt this Period

22.19

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER R KIAH

Mailing Address 1975 ROSE TERRACE

City State Zip Code
 RIVERWOODS IL 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 ▼

990.75

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762361

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

76.24

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: PAGE 131 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

Mailing Address 1975 ROSE TERRACE

City State Zip Code
 RIVERWOODS IL 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 ▼

1030.51

Date of Receipt

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

Transaction ID: A2006-1941483

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 State Zip Code
 BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.60

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762541

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 State Zip Code
 BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.74

Date of Receipt

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

Transaction ID: A2006-1941661

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: PAGE 132 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PAUL N KIERIG

Mailing Address 200 OXFORD RD

City State Zip Code
Tower Lakes 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 ▼

596.96

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762592

Amount of Each Receipt this Period

24.01

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

PAUL N KIERIG

Mailing Address 200 OXFORD RD

City State Zip Code
Tower Lakes 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 ▼

620.97

Date of Receipt

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

Transaction ID: A2006-1941712

Amount of Each Receipt this Period

24.01

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

BARBARA L KILROY

Mailing Address 1036 VINEYARD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.63

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762445

Amount of Each Receipt this Period

16.67

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 133 / 301

(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)
BARBARA L KILROY

Mailing Address 1036 VINEYARD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.30

Date of Receipt

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

Transaction ID: A2006-1941567

Amount of Each Receipt this Period

16.67

B. Full Name (Last, First, Middle Initial)
JAMES P KING

Mailing Address 592 TURNER AVENUE

City State Zip Code
GLEN ELLYN IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762662

Amount of Each Receipt this Period

34.45

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

Mailing Address 592 TURNER AVENUE

City State Zip Code
GLEN ELLYN IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.90

Date of Receipt

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

Transaction ID: A2006-1941782

Amount of Each Receipt this Period

34.45

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: PAGE 134 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LAURA S KISTNER
Mailing Address 22047 W. PETOSKEY CT

City State Zip Code
PLAINFIELD IL 60544

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 ▼

394.66

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762723

Amount of Each Receipt this Period

16.16

B. Full Name (Last, First, Middle Initial)
LAURA S KISTNER
Mailing Address 22047 W. PETOSKEY CT

City State Zip Code
PLAINFIELD IL 60544

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 ▼

410.82

Date of Receipt

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

Transaction ID: A2006-1941842

Amount of Each Receipt this Period

16.16

C. Full Name (Last, First, Middle Initial)
STEVEN T KLODZINSKI
Mailing Address 12085 Pond View Ct

City State Zip Code
Culpeper VA 22701

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 ▼

223.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762622

Amount of Each Receipt this Period

9.01

SUBTOTAL of Receipts This Page (optional)

41.33

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 135 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEVEN T KLODZINSKI
Mailing Address 12085 Pond View Ct

City State Zip Code
Culpeper VA 22701

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 ▼

232.76

Date of Receipt

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

Transaction ID: A2006-1941742

Amount of Each Receipt this Period

9.01

B. Full Name (Last, First, Middle Initial)
KEITH A KNAPP
Mailing Address 175 Macarthur Dr. #3712

City State Zip Code
Willowbrook IL 60527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Director DSN & CONST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762510

Amount of Each Receipt this Period

17.06

C. Full Name (Last, First, Middle Initial)
KEITH A KNAPP
Mailing Address 175 Macarthur Dr. #3712

City State Zip Code
Willowbrook IL 60527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Director DSN & CONST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.46

Date of Receipt

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

Transaction ID: A2006-1941631

Amount of Each Receipt this Period

17.06

SUBTOTAL of Receipts This Page (optional)

43.13

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 136 / 301

(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 (Last, First, Middle Initial)

A. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City State Zip Code
 NORTHBROOK IL 60062

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 ▼

661.35

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762746

Amount of Each Receipt this Period

26.66

Full Name (Last, First, Middle Initial)

B. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City State Zip Code
 NORTHBROOK IL 60062

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 ▼

688.01

Date of Receipt

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

Transaction ID: A2006-1941865

Amount of Each Receipt this Period

26.66

Full Name (Last, First, Middle Initial)

C. MARY G KNIPP

Mailing Address 2050 GLENDALE AVENUE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Allstate Financial Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.65

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762529

Amount of Each Receipt this Period

19.66

SUBTOTAL of Receipts This Page (optional)

72.98

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 137 / 301

(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 (Last, First, Middle Initial)

A. MARY G KNIPP

Mailing Address 2050 GLENDALE AVENUE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Allstate Financial Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.31

Date of Receipt

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

Transaction ID: A2006-1941650

Amount of Each Receipt this Period

19.66

Full Name (Last, First, Middle Initial)

B. GARY L KOCHANER

Mailing Address 743 CARDIGAN CT

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

817.50

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762548

Amount of Each Receipt this Period

32.70

Full Name (Last, First, Middle Initial)

C. GARY L KOCHANER

Mailing Address 743 CARDIGAN CT

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.20

Date of Receipt

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

Transaction ID: A2006-1941668

Amount of Each Receipt this Period

32.70

SUBTOTAL of Receipts This Page (optional)

85.06

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: PAGE 138 / 301

(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 (Last, First, Middle Initial)

A. JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City State Zip Code
 VERNON HILLS IL 60061

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 ▼

1030.05

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762543

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

B. JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City State Zip Code
 VERNON HILLS IL 60061

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 ▼

1069.82

Date of Receipt

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

Transaction ID: A2006-1941663

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

C. 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 ▼

1619.95

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762595

Amount of Each Receipt this Period

65.33

SUBTOTAL of Receipts This Page (optional)

144.87

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: PAGE 139 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL A 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 CompanyOccupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1685.28

Date of Receipt

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

Transaction ID: A2006-1941715

Amount of Each Receipt this Period

65.33

B. 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 CompanyOccupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762385

Amount of Each Receipt this Period

42.67

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 CompanyOccupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.42

Date of Receipt

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

Transaction ID: A2006-1941507

Amount of Each Receipt this Period

42.67

SUBTOTAL of Receipts This Page (optional)

150.67

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: PAGE 140 / 301

(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 (Last, First, Middle Initial)

A. DEBORAH G LAWRENCE

Mailing Address 910 S MICHIGAN AVE #1501

City State Zip Code
CHICAGO IL 60605

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 ▼

497.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762517

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

B. DEBORAH G LAWRENCE

Mailing Address 910 S MICHIGAN AVE #1501

City State Zip Code
CHICAGO IL 60605

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 ▼

516.88

Date of Receipt

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

Transaction ID: A2006-1941638

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

C. 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 ▼

1724.86

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762752

Amount of Each Receipt this Period

69.56

SUBTOTAL of Receipts This Page (optional)

109.32

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 301

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 ▼

1794.42

Date of Receipt

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

Transaction ID: A2006-1941871

Amount of Each Receipt this Period

69.56

B. 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 ▼

1268.56

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762372

Amount of Each Receipt this Period

55.62

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 ▼

1324.18

Date of Receipt

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

Transaction ID: A2006-1941494

Amount of Each Receipt this Period

55.62

SUBTOTAL of Receipts This Page (optional)

180.80

TOTAL This Period (last page this line 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 142 / 301

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHELLE LEE
Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1340.01

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762800

Amount of Each Receipt this Period

54.04

B. Full Name (Last, First, Middle Initial)
MICHELLE LEE
Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1394.05

Date of Receipt

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

Transaction ID: A2006-1941919

Amount of Each Receipt this Period

54.04

C. Full Name (Last, First, Middle Initial)
SUSAN L LEES
Mailing Address 1705 DARTMOUTH LN

City State Zip Code
DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

573.28

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762359

Amount of Each Receipt this Period

23.27

SUBTOTAL of Receipts This Page (optional)

131.35

TOTAL This Period (last page this line 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 143 / 301

(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 (Last, First, Middle Initial)

A. SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City State Zip Code
 DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.55

Date of Receipt

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

Transaction ID: A2006-1941481

Amount of Each Receipt this Period

23.27

Full Name (Last, First, Middle Initial)

B. ANDREW P LEICHT

Mailing Address 25658 N ARROWHEAD

City State Zip Code
 MUNDELEIN IL 60060

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 ▼

817.25

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762553

Amount of Each Receipt this Period

32.69

Full Name (Last, First, Middle Initial)

C. ANDREW P LEICHT

Mailing Address 25658 N ARROWHEAD

City State Zip Code
 MUNDELEIN IL 60060

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 ▼

849.94

Date of Receipt

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

Transaction ID: A2006-1941673

Amount of Each Receipt this Period

32.69

SUBTOTAL of Receipts This Page (optional)

88.65

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 144 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City State Zip Code
 ACWORTH GA 30101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.50

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762618

Amount of Each Receipt this Period

20.85

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

NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City State Zip Code
 ACWORTH GA 30101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.35

Date of Receipt

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

Transaction ID: A2006-1941738

Amount of Each Receipt this Period

20.85

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

GARY L LEVINE

Mailing Address 9372 S 35TH STREET

City State Zip Code
 FRANKLIN WI 53132

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.85

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762719

Amount of Each Receipt this Period

11.27

SUBTOTAL of Receipts This Page (optional)

52.97

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 145 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GARY L LEVINE
Mailing Address 9372 S 35TH STREET

City State Zip Code
FRANKLIN WI 53132

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.12

Date of Receipt

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

Transaction ID: A2006-1941838

Amount of Each Receipt this Period

11.27

B. Full Name (Last, First, Middle Initial)
KELLY J LIEN
Mailing Address 3 BEDFORD COURT

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.85

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762774

Amount of Each Receipt this Period

16.69

C. Full Name (Last, First, Middle Initial)
KELLY J LIEN
Mailing Address 3 BEDFORD COURT

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.54

Date of Receipt

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

Transaction ID: A2006-1941893

Amount of Each Receipt this Period

16.69

SUBTOTAL of Receipts This Page (optional)

44.65

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 146 / 301

(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 (Last, First, Middle Initial)

A. TERESA G LOGUE

Mailing Address 7187 PRESIDENTIAL DRIVE

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Direct Response

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.35

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762574

Amount of Each Receipt this Period

21.27

Full Name (Last, First, Middle Initial)

B. TERESA G LOGUE

Mailing Address 7187 PRESIDENTIAL DRIVE

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Direct Response

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.62

Date of Receipt

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

Transaction ID: A2006-1941694

Amount of Each Receipt this Period

21.27

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER T LONGEWAY

Mailing Address 1134 W. PATTERSON #1

City State Zip Code
 CHICAGO IL 60613

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 ▼

670.35

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762606

Amount of Each Receipt this Period

27.02

SUBTOTAL of Receipts This Page (optional)

69.56

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 147 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER T LONGEWAY

Mailing Address 1134 W. PATTERSON #1

City State Zip Code
CHICAGO IL 60613

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 ▼

697.37

Date of Receipt

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

Transaction ID: A2006-1941726

Amount of Each Receipt this Period

27.02

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

Mailing Address 4666 SW HAMMOCK CREEK DR

City State Zip Code
PALM CITY FL 34990

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 ▼

408.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762481

Amount of Each Receipt this Period

16.35

C. Full Name (Last, First, Middle Initial)
RICHARD E LOTT

Mailing Address 4666 SW HAMMOCK CREEK DR

City State Zip Code
PALM CITY FL 34990

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 ▼

425.10

Date of Receipt

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

Transaction ID: A2006-1941602

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

59.72

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 148 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

876.60

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762686

Amount of Each Receipt this Period

35.40

Full Name (Last, First, Middle Initial)

B. 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 ▼

912.00

Date of Receipt

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

Transaction ID: A2006-1941806

Amount of Each Receipt this Period

35.40

Full Name (Last, First, Middle Initial)

C. 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 ▼

318.68

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762621

Amount of Each Receipt this Period

13.56

SUBTOTAL of Receipts This Page (optional)

84.36

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 149 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

332.97

Date of Receipt

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

Transaction ID: A2006-1941741

Amount of Each Receipt this Period

14.29

B. Full Name (Last, First, Middle Initial)
BENJAMIN E LUMICAO
Mailing Address 343 S. DEARBORN ST. APT. 504

City State Zip Code
 CHICAGO IL 60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.10

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762647

Amount of Each Receipt this Period

29.40

C. Full Name (Last, First, Middle Initial)
BENJAMIN E LUMICAO
Mailing Address 343 S. DEARBORN ST. APT. 504

City State Zip Code
 CHICAGO IL 60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

758.50

Date of Receipt

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

Transaction ID: A2006-1941767

Amount of Each Receipt this Period

29.40

SUBTOTAL of Receipts This Page (optional)

73.09

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 150 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

571.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762697

Amount of Each Receipt this Period

22.96

B. Full Name (Last, First, Middle Initial)
DANIEL J MACDONALD
Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.71

Date of Receipt

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

Transaction ID: A2006-1941817

Amount of Each Receipt this Period

22.96

C. Full Name (Last, First, Middle Initial)
MORRIS A MADURO
Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

896.05

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762384

Amount of Each Receipt this Period

36.22

SUBTOTAL of Receipts This Page (optional)

82.14

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 151 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

MORRIS A MADURO

Mailing Address PO BOX 4343

City State Zip Code
 NAPERVILLE IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

932.27

Date of Receipt

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

Transaction ID: A2006-1941506

Amount of Each Receipt this Period

36.22

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

KATHERINE MALCOMSON

Mailing Address 185 NILES EAST

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Education and Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762682

Amount of Each Receipt this Period

18.35

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

KATHERINE MALCOMSON

Mailing Address 185 NILES EAST

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Education and Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.35

Date of Receipt

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

Transaction ID: A2006-1941802

Amount of Each Receipt this Period

18.35

SUBTOTAL of Receipts This Page (optional)

72.92

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 152 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 FELIX A MANTILLA
 Mailing Address 28601 N. Sky Crest Drive

City State Zip Code
 Ivanhoe IL 60060

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 ▼

1122.88

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762699

Amount of Each Receipt this Period

45.38

B. Full Name (Last, First, Middle Initial)
 FELIX A MANTILLA
 Mailing Address 28601 N. Sky Crest Drive

City State Zip Code
 Ivanhoe IL 60060

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 ▼

1168.26

Date of Receipt

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

Transaction ID: A2006-1941819

Amount of Each Receipt this Period

45.38

C. Full Name (Last, First, Middle Initial)
 KENNETH P MARCOTTE
 Mailing Address 2311 HAVERTON DR

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.15

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762558

Amount of Each Receipt this Period

17.38

SUBTOTAL of Receipts This Page (optional)

108.14

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 153 / 301

(check only one)

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

Allstate Insurance Company PAC

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

Mailing Address 2311 HAVERTON DR

City	State	Zip Code
MUNDELEIN	IL	60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.53

Date of Receipt

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

Transaction ID: A2006-1941678

Amount of Each Receipt this Period

17.38

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

Mailing Address 3178 HAVEN LANE

City	State	Zip Code
LINDENHURST	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CC IT Senior Planning Con

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762624

Amount of Each Receipt this Period

12.19

C. Full Name (Last, First, Middle Initial)
MICHAEL P MARK

Mailing Address 3178 HAVEN LANE

City	State	Zip Code
LINDENHURST	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CC IT Senior Planning Con

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.19

Date of Receipt

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

Transaction ID: A2006-1941744

Amount of Each Receipt this Period

12.19

SUBTOTAL of Receipts This Page (optional)

41.76

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: PAGE 154 / 301

(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 (Last, First, Middle Initial)

A. JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City State Zip Code
LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.93

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762648

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

B. JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City State Zip Code
LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.81

Date of Receipt

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

Transaction ID: A2006-1941768

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

C. W. D Mays

Mailing Address 256 Post Oak Drive

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 ▼

411.03

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762457

Amount of Each Receipt this Period

17.96

SUBTOTAL of Receipts This Page (optional)

57.72

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 155 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
W. D Mays
Mailing Address 256 Post Oak Drive

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 ▼

428.99

Date of Receipt

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

Transaction ID: A2006-1941579

Amount of Each Receipt this Period

17.96

B. 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 ▼

2823.36

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762766

Amount of Each Receipt this Period

115.39

C. 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 ▼

2938.75

Date of Receipt

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

Transaction ID: A2006-1941885

Amount of Each Receipt this Period

115.39

SUBTOTAL of Receipts This Page (optional)

248.74

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: PAGE 156 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

734.59

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762371

Amount of Each Receipt this Period

29.63

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 ▼

814.91

Date of Receipt

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

Transaction ID: A2006-1941493

Amount of Each Receipt this Period

80.32

C. Full Name (Last, First, Middle Initial)
MARY J MC GINN
Mailing Address 155 BUCKLEY ROAD

City State Zip Code
BARRINGTON HILL IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1807.21

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762632

Amount of Each Receipt this Period

72.70

SUBTOTAL of Receipts This Page (optional)

182.65

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 157 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

1879.91

Date of Receipt

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

Transaction ID: A2006-1941752

Amount of Each Receipt this Period

72.70

B. Full Name (Last, First, Middle Initial)
JOHN A MC LAUGHLIN
Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

952.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762583

Amount of Each Receipt this Period

38.36

C. Full Name (Last, First, Middle Initial)
JOHN A MC LAUGHLIN
Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.36

Date of Receipt

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

Transaction ID: A2006-1941703

Amount of Each Receipt this Period

38.36

SUBTOTAL of Receipts This Page (optional)

149.42

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: PAGE 158 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICIA M MCCARTHY

Mailing Address 222 STONE FENCE ROAD

City State Zip Code
VERNON HILLS IL 60061

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 ▼

496.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762399

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)
PATRICIA M MCCARTHY

Mailing Address 222 STONE FENCE ROAD

City State Zip Code
VERNON HILLS IL 60061

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 ▼

516.68

Date of Receipt

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

Transaction ID: A2006-1941521

Amount of Each Receipt this Period

19.88

C. Full Name (Last, First, Middle Initial)
SALLY J MCCARTHY

Mailing Address 1036 ROLLING PASS

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Manager Bonus

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.10

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762630

Amount of Each Receipt this Period

12.92

SUBTOTAL of Receipts This Page (optional)

52.88

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: PAGE 159 / 301

(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 (Last, First, Middle Initial)

A. SALLY J MCCARTHY

Mailing Address 1036 ROLLING PASS

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Manager Bonus

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.02

Date of Receipt

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

Transaction ID: A2006-1941750

Amount of Each Receipt this Period

12.92

Full Name (Last, First, Middle Initial)

B. 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 ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762628

Amount of Each Receipt this Period

14.74

Full Name (Last, First, Middle Initial)

C. 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 ▼

380.74

Date of Receipt

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

Transaction ID: A2006-1941748

Amount of Each Receipt this Period

14.74

SUBTOTAL of Receipts This Page (optional)

42.40

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 160 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

330.86

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762443

Amount of Each Receipt this Period

14.47

Full Name (Last, First, Middle Initial)

B. 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 ▼

346.48

Date of Receipt

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

Transaction ID: A2006-1941565

Amount of Each Receipt this Period

15.62

Full Name (Last, First, Middle Initial)

C. CHARLTON T MCDONALD

Mailing Address 195 ALPINE DRIVE

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Insurance Reserve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.73

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762532

Amount of Each Receipt this Period

50.79

SUBTOTAL of Receipts This Page (optional)

80.88

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 161 / 301

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 MARK J MCDONNELL
 Mailing Address 70 MC ECHRON LANE

City State Zip Code
 QUEENSBURY NY 12804

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 ▼

616.50

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762422

Amount of Each Receipt this Period

25.03

B. Full Name (Last, First, Middle Initial)
 MARK J MCDONNELL
 Mailing Address 70 MC ECHRON LANE

City State Zip Code
 QUEENSBURY NY 12804

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 ▼

641.53

Date of Receipt

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

Transaction ID: A2006-1941544

Amount of Each Receipt this Period

25.03

C. Full Name (Last, First, Middle Initial)
 MARK A MCGILLIVRAY
 Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.67

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762775

Amount of Each Receipt this Period

19.73

SUBTOTAL of Receipts This Page (optional)

69.79

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 162 / 301

(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 (Last, First, Middle Initial)

A. MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.40

Date of Receipt

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

Transaction ID: A2006-1941894

Amount of Each Receipt this Period

19.73

Full Name (Last, First, Middle Initial)

B. EVA M MCINTEE

Mailing Address 28 MANCERA

City State Zip Code
 RANCHO SANTA MA CA 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 ▼

715.90

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762770

Amount of Each Receipt this Period

29.80

Full Name (Last, First, Middle Initial)

C. EVA M MCINTEE

Mailing Address 28 MANCERA

City State Zip Code
 RANCHO SANTA MA CA 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 ▼

745.70

Date of Receipt

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

Transaction ID: A2006-1941889

Amount of Each Receipt this Period

29.80

SUBTOTAL of Receipts This Page (optional)

79.33

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 163 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL 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 ▼

1063.25

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762452

Amount of Each Receipt this Period

42.88

B. 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 ▼

1106.13

Date of Receipt

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

Transaction ID: A2006-1941574

Amount of Each Receipt this Period

42.88

C. Full Name (Last, First, Middle Initial)
PATRICIA S MCPHERSON
Mailing Address 3133 N. Walker Lane West

City State Zip Code
Arlington Heights IL 60004

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 ▼

407.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762780

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

102.11

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 164 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICIA S MCPHERSON

Mailing Address 3133 N. Walker Lane West

City State Zip Code
Arlington Heights IL 60004

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 ▼

423.75

Date of Receipt

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

Transaction ID: A2006-1941899

Amount of Each Receipt this Period

16.35

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

Mailing Address 1213 THORNDAL LN

City State Zip Code
LAKE ZURICH IL 60047

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 ▼

468.85

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762491

Amount of Each Receipt this Period

18.97

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

Mailing Address 1213 THORNDAL LN

City State Zip Code
LAKE ZURICH IL 60047

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 ▼

487.82

Date of Receipt

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

Transaction ID: A2006-1941612

Amount of Each Receipt this Period

18.97

SUBTOTAL of Receipts This Page (optional)

54.29

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: PAGE 165 / 301

(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. STACY L MCWHORTER

Mailing Address 6345 OLD FARM LANE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762660

Amount of Each Receipt this Period

10.89

Full Name (Last, First, Middle Initial)

B. STACY L MCWHORTER

Mailing Address 6345 OLD FARM LANE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.29

Date of Receipt

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

Transaction ID: A2006-1941780

Amount of Each Receipt this Period

10.89

Full Name (Last, First, Middle Initial)

C. DANIEL K MEHIGAN

Mailing Address 1829 GATEWOOD DR

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762692

Amount of Each Receipt this Period

11.09

SUBTOTAL of Receipts This Page (optional)

32.87

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: PAGE 166 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DANIEL K MEHIGAN

Mailing Address 1829 GATEWOOD DR

City State Zip Code
GURNEE IL 60031

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 ▼

286.25

Date of Receipt

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

Transaction ID: A2006-1941812

Amount of Each Receipt this Period

11.09

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

Mailing Address 21050 PRESTWICK DRIVE

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

774.28

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762378

Amount of Each Receipt this Period

31.31

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

Mailing Address 21050 PRESTWICK DRIVE

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.59

Date of Receipt

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

Transaction ID: A2006-1941500

Amount of Each Receipt this Period

31.31

SUBTOTAL of Receipts This Page (optional)

73.71

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: PAGE 167 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JANE M MELLON

Mailing Address 184 GARFIELD

City State Zip Code
 ELMHURST IL 60126

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 ▼

963.95

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762564

Amount of Each Receipt this Period

38.82

Full Name (Last, First, Middle Initial)

B. JANE M MELLON

Mailing Address 184 GARFIELD

City State Zip Code
 ELMHURST IL 60126

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 ▼

1002.77

Date of Receipt

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

Transaction ID: A2006-1941684

Amount of Each Receipt this Period

38.82

Full Name (Last, First, Middle Initial)

C. 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 ▼

429.99

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762615

Amount of Each Receipt this Period

16.35

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 168 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

446.34

Date of Receipt

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

Transaction ID: A2006-1941735

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 ▼

308.89

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762386

Amount of Each Receipt this Period

12.49

C. 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 ▼

321.38

Date of Receipt

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

Transaction ID: A2006-1941508

Amount of Each Receipt this Period

12.49

SUBTOTAL of Receipts This Page (optional)

41.33

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 169 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. JACK C MIGDAL

Full Name (Last, First, Middle Initial)

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 ▼

408.75

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762402

Amount of Each Receipt this Period

16.35

B. JACK C MIGDAL

Full Name (Last, First, Middle Initial)

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 ▼

425.10

Date of Receipt

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

Transaction ID: A2006-1941524

Amount of Each Receipt this Period

16.35

C. FREDERICK J MILLER

Full Name (Last, First, Middle Initial)

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 ▼

471.92

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762513

Amount of Each Receipt this Period

21.47

SUBTOTAL of Receipts This Page (optional)

54.17

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 170 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

FREDERICK J MILLER

Mailing Address 6975 MEADOW POINT TER

City	State	Zip Code
NEW MARKET	MD	21774

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Market Distribution Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.39

Date of Receipt

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

Transaction ID: A2006-1941634

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 CompanyOccupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762675

Amount of Each Receipt this Period

19.37

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 CompanyOccupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.32

Date of Receipt

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

Transaction ID: A2006-1941795

Amount of Each Receipt this Period

19.37

SUBTOTAL of Receipts This Page (optional)

60.21

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 171 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

560.55

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762483

Amount of Each Receipt this Period

22.68

B. 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 ▼

583.23

Date of Receipt

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

Transaction ID: A2006-1941604

Amount of Each Receipt this Period

22.68

C. Full Name (Last, First, Middle Initial)
APRIL A MINKUS

Mailing Address 1132 GREENTREE ST.

City State Zip Code
DEERFIELD IL 60015

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 ▼

363.05

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762609

Amount of Each Receipt this Period

14.66

SUBTOTAL of Receipts This Page (optional)

60.02

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 172 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
APRIL A MINKUS
Mailing Address 1132 GREENTREE ST.

City State Zip Code
DEERFIELD IL 60015

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 ▼

377.71

Date of Receipt

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

Transaction ID: A2006-1941729

Amount of Each Receipt this Period

14.66

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 ▼

987.85

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762366

Amount of Each Receipt this Period

39.63

C. 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 ▼

1027.48

Date of Receipt

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

Transaction ID: A2006-1941488

Amount of Each Receipt this Period

39.63

SUBTOTAL of Receipts This Page (optional)

93.92

TOTAL This Period (last page this line number only)

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

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or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. 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 ▼

320.55

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762783

Amount of Each Receipt this Period

12.99

Full Name (Last, First, Middle Initial)

B. 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 ▼

333.54

Date of Receipt

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

Transaction ID: A2006-1941902

Amount of Each Receipt this Period

12.99

Full Name (Last, First, Middle Initial)

C. ALLISON L MOE

Mailing Address 215 Brampton 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
Senior Field Operations M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.74

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762589

Amount of Each Receipt this Period

12.34

SUBTOTAL of Receipts This Page (optional)

38.32

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 174 / 301

(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 (Last, First, Middle Initial)

A. ALLISON L MOE

Mailing Address 215 Brampton 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
Senior Field Operations M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.08

Date of Receipt

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

Transaction ID: A2006-1941709

Amount of Each Receipt this Period

12.34

Full Name (Last, First, Middle Initial)

B. LAWRENCE P MOEWS

Mailing Address 740 W. JENNIFER CT.

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1133.94

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762556

Amount of Each Receipt this Period

47.65

Full Name (Last, First, Middle Initial)

C. LAWRENCE P MOEWS

Mailing Address 740 W. JENNIFER CT.

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1181.59

Date of Receipt

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

Transaction ID: A2006-1941676

Amount of Each Receipt this Period

47.65

SUBTOTAL of Receipts This Page (optional)

107.64

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: PAGE 175 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 MARCIE E MOLEK
 Mailing Address 400 KEVIN LANE

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.96

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762571

Amount of Each Receipt this Period

20.75

B. Full Name (Last, First, Middle Initial)
 MARCIE E MOLEK
 Mailing Address 400 KEVIN LANE

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.71

Date of Receipt

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

Transaction ID: A2006-1941691

Amount of Each Receipt this Period

20.75

C. 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 ▼

408.75

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762779

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

57.85

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 176 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

425.10

Date of Receipt

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

Transaction ID: A2006-1941898

Amount of Each Receipt this Period

16.35

Full Name (Last, First, Middle Initial)

B. 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 ▼

1172.45

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762442

Amount of Each Receipt this Period

47.22

Full Name (Last, First, Middle Initial)

C. 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 ▼

1219.67

Date of Receipt

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

Transaction ID: A2006-1941564

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 177 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KAREN S MORRIS
Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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 ▼

942.65

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762651

Amount of Each Receipt this Period

38.09

B. Full Name (Last, First, Middle Initial)
KAREN S MORRIS
Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
MUNDELEIN IL 60060

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 ▼

980.74

Date of Receipt

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

Transaction ID: A2006-1941771

Amount of Each Receipt this Period

38.09

C. Full Name (Last, First, Middle Initial)
J R MOSELEY III
Mailing Address 1808 N CASCADE DRIVE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762466

Amount of Each Receipt this Period

12.29

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: PAGE 178 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
J R MOSELEY III
Mailing Address 1808 N CASCADE DRIVE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.09

Date of Receipt

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

Transaction ID: A2006-1941588

Amount of Each Receipt this Period

12.29

B. Full Name (Last, First, Middle Initial)
LARRY E MOSER
Mailing Address 611 W. BURNING TREE LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.65

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762563

Amount of Each Receipt this Period

28.27

C. Full Name (Last, First, Middle Initial)
LARRY E MOSER
Mailing Address 611 W. BURNING TREE LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.92

Date of Receipt

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

Transaction ID: A2006-1941683

Amount of Each Receipt this Period

28.27

SUBTOTAL of Receipts This Page (optional)

68.83

TOTAL This Period (last page this line 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 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL
Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762449

Amount of Each Receipt this Period

27.92

B. Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL
Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.92

Date of Receipt

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

Transaction ID: A2006-1941571

Amount of Each Receipt this Period

27.92

C. Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL
Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

874.70

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762549

Amount of Each Receipt this Period

35.26

SUBTOTAL of Receipts This Page (optional)

91.10

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 180 / 301

(check only one)

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

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

909.96

Date of Receipt

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

Transaction ID: A2006-1941669

Amount of Each Receipt this Period

35.26

B. Full Name (Last, First, Middle Initial)
ELADIO R MUNIZ

Mailing Address 11127 SPYGLASS HILL LANE

City State Zip Code
ALBUQUERQUE NM 87111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762419

Amount of Each Receipt this Period

16.35

C. Full Name (Last, First, Middle Initial)
ELADIO R MUNIZ

Mailing Address 11127 SPYGLASS HILL LANE

City State Zip Code
ALBUQUERQUE NM 87111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.95

Date of Receipt

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

Transaction ID: A2006-1941541

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

67.96

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: PAGE 181 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL A MURPHY

Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

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 ▼

985.95

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762736

Amount of Each Receipt this Period

39.76

B. Full Name (Last, First, Middle Initial)
MICHAEL A MURPHY

Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

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 ▼

1025.71

Date of Receipt

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

Transaction ID: A2006-1941855

Amount of Each Receipt this Period

39.76

C. Full Name (Last, First, Middle Initial)
ROBERT J MURPHY

Mailing Address 18 MIDDLEBURY LANE

City State Zip Code
LINCOLNSHIRE IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.07

Date of Receipt

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

Transaction ID: A2006-1941547

Amount of Each Receipt this Period

7.85

SUBTOTAL of Receipts This Page (optional)

87.37

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 182 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LINDA MYERS
Mailing Address 2333 CENTRAL ST #101

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Tax Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.85

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762724

Amount of Each Receipt this Period

15.23

B. Full Name (Last, First, Middle Initial)
LINDA MYERS
Mailing Address 2333 CENTRAL ST #101

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Tax Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.08

Date of Receipt

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

Transaction ID: A2006-1941843

Amount of Each Receipt this Period

15.23

C. Full Name (Last, First, Middle Initial)
DAVID G NADIG
Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1138.74

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762670

Amount of Each Receipt this Period

46.23

SUBTOTAL of Receipts This Page (optional)

76.69

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 183 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID G NADIG
Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.97

Date of Receipt

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

Transaction ID: A2006-1941790

Amount of Each Receipt this Period

46.23

B. Full Name (Last, First, Middle Initial)
BRIAN J NAGEL
Mailing Address 1211 AIMTREE

City State Zip Code
SCHAUMBURG IL 60194

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 ▼

890.20

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762578

Amount of Each Receipt this Period

35.95

C. Full Name (Last, First, Middle Initial)
BRIAN J NAGEL
Mailing Address 1211 AIMTREE

City State Zip Code
SCHAUMBURG IL 60194

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 ▼

926.15

Date of Receipt

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

Transaction ID: A2006-1941698

Amount of Each Receipt this Period

35.95

SUBTOTAL of Receipts This Page (optional)

118.13

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 184 / 301

(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 (Last, First, Middle Initial)

A. JOAN M NAUGHTON-GERDES

Mailing Address 650 MALIBOU

City State Zip Code
 PALATINE IL 60074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.90

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762649

Amount of Each Receipt this Period

19.26

Full Name (Last, First, Middle Initial)

B. JOAN M NAUGHTON-GERDES

Mailing Address 650 MALIBOU

City State Zip Code
 PALATINE IL 60074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.16

Date of Receipt

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

Transaction ID: A2006-1941769

Amount of Each Receipt this Period

19.26

Full Name (Last, First, Middle Initial)

C. DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

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 Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2588.55

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762534

Amount of Each Receipt this Period

104.62

SUBTOTAL of Receipts This Page (optional)

143.14

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 185 / 301

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) DANIEL C NECASTRO Mailing Address 22622 N. LINDEN DR 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 Technology Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2693.17		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941654 Amount of Each Receipt this Period 104.62
B. Full Name (Last, First, Middle Initial) JEANNIE M NEWMAN Mailing Address 9969 LONGVIEW DRIVE City State Zip Code LITTLETON CO 80124 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 ▼ 447.75		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762765 Amount of Each Receipt this Period 17.91
C. Full Name (Last, First, Middle Initial) JEANNIE M NEWMAN Mailing Address 9969 LONGVIEW DRIVE City State Zip Code LITTLETON CO 80124 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 ▼ 465.66		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941884 Amount of Each Receipt this Period 17.91
SUBTOTAL of Receipts This Page (optional) ▶		140.44
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 186 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICK K NOLL
Mailing Address 22451 THORNBURY CT

City State Zip Code
DEER PARK IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.44

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762737

Amount of Each Receipt this Period

21.77

B. Full Name (Last, First, Middle Initial)
PATRICK K NOLL
Mailing Address 22451 THORNBURY CT

City State Zip Code
DEER PARK IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.21

Date of Receipt

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

Transaction ID: A2006-1941856

Amount of Each Receipt this Period

21.77

C. 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 ▼

610.85

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762728

Amount of Each Receipt this Period

24.60

SUBTOTAL of Receipts This Page (optional)

68.14

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 187 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

635.45

Date of Receipt

12 / 22 / 2006

Transaction ID: A2006-1941847

Amount of Each Receipt this Period

24.60

Full Name (Last, First, Middle Initial)

B. THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City State Zip Code
WAUKEGAN IL 60085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

12 / 08 / 2006

Transaction ID: A2006-1762663

Amount of Each Receipt this Period

14.08

Full Name (Last, First, Middle Initial)

C. THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City State Zip Code
WAUKEGAN IL 60085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.08

Date of Receipt

12 / 22 / 2006

Transaction ID: A2006-1941783

Amount of Each Receipt this Period

14.08

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: PAGE 188 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RICHARD 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 ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762525

Amount of Each Receipt this Period

17.72

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 ▼

457.72

Date of Receipt

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

Transaction ID: A2006-1941646

Amount of Each Receipt this Period

17.72

C. Full Name (Last, First, Middle Initial)
 BRIAN M O'DELL
 Mailing Address 3434 WHITE ADMIRAL COURT

City State Zip Code
 EDGEWATER MD 21037

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 ▼

783.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762454

Amount of Each Receipt this Period

31.32

SUBTOTAL of Receipts This Page (optional)

66.76

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: PAGE 189 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) BRIAN M O'DELL Mailing Address 3434 WHITE ADMIRAL COURT City State Zip Code EDGEWATER MD 21037 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 ▼ 814.32		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941576 Amount of Each Receipt this Period 31.32
B. 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 397.95		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762641 Amount of Each Receipt this Period 16.07
C. 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 414.02		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941761 Amount of Each Receipt this Period 16.07

SUBTOTAL of Receipts This Page (optional)

63.46

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 190 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL 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 CompanyOccupation
Agency Consulting Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762401

Amount of Each Receipt this Period

24.54

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 CompanyOccupation
Agency Consulting Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.29

Date of Receipt

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

Transaction ID: A2006-1941523

Amount of Each Receipt this Period

24.54

C. 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 CompanyOccupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762363

Amount of Each Receipt this Period

15.67

SUBTOTAL of Receipts This Page (optional)

64.75

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 191 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWARD 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 CompanyOccupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.42

Date of Receipt

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

Transaction ID: A2006-1941485

Amount of Each Receipt this Period

15.67

B. 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 CompanyOccupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

724.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762638

Amount of Each Receipt this Period

29.51

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 CompanyOccupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.86

Date of Receipt

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

Transaction ID: A2006-1941758

Amount of Each Receipt this Period

29.51

SUBTOTAL of Receipts This Page (optional)

74.69

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 192 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

KATHY A OLCESE

Mailing Address 35 YORK ST

City State Zip Code
 HUDSON OH 44236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Risk Management Busin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.42

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762515

Amount of Each Receipt this Period

23.09

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

KATHY A OLCESE

Mailing Address 35 YORK ST

City State Zip Code
 HUDSON OH 44236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Risk Management Busin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.51

Date of Receipt

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

Transaction ID: A2006-1941636

Amount of Each Receipt this Period

23.09

C. 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 ▼

802.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762706

Amount of Each Receipt this Period

32.40

SUBTOTAL of Receipts This Page (optional)

78.58

TOTAL This Period (last page this line 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 193 / 301

(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)
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 CompanyOccupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.70

Date of Receipt

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

Transaction ID: A2006-1941826

Amount of Each Receipt this Period

32.40

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 CompanyOccupation
Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1509.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762725

Amount of Each Receipt this Period

60.96

C. 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 CompanyOccupation
Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1570.54

Date of Receipt

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

Transaction ID: A2006-1941844

Amount of Each Receipt this Period

60.96

SUBTOTAL of Receipts This Page (optional)

154.32

TOTAL This Period (last page this line 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 194 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

PAMELA J OVERTON

Mailing Address 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 ▼

856.25

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762489

Amount of Each Receipt this Period

34.58

B. 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 ▼

890.83

Date of Receipt

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

Transaction ID: A2006-1941610

Amount of Each Receipt this Period

34.58

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

ALAN D PAGE

Mailing Address 13530 LUCKY LAKE 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
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.29

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762794

Amount of Each Receipt this Period

34.62

SUBTOTAL of Receipts This Page (optional)

103.78

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 301

(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 (Last, First, Middle Initial)

A. ALAN D PAGE

Mailing Address 13530 LUCKY LAKE 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
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.91

Date of Receipt

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

Transaction ID: A2006-1941913

Amount of Each Receipt this Period

34.62

Full Name (Last, First, Middle Initial)

B. DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City State Zip Code
 EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.70

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762444

Amount of Each Receipt this Period

39.25

Full Name (Last, First, Middle Initial)

C. DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City State Zip Code
 EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1012.95

Date of Receipt

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

Transaction ID: A2006-1941566

Amount of Each Receipt this Period

39.25

SUBTOTAL of Receipts This Page (optional)

113.12

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
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FOR LINE NUMBER: PAGE 196 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT L PARK
Mailing Address 1107 BONITA DRIVE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Public Relations Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1264.14

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762639

Amount of Each Receipt this Period

50.98

B. Full Name (Last, First, Middle Initial)
ROBERT L PARK
Mailing Address 1107 BONITA DRIVE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Public Relations Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1315.12

Date of Receipt

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

Transaction ID: A2006-1941759

Amount of Each Receipt this Period

50.98

C. Full Name (Last, First, Middle Initial)
ROGER D PARKER
Mailing Address 1305 N MAIDSTONE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1141.79

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762788

Amount of Each Receipt this Period

46.17

SUBTOTAL of Receipts This Page (optional)

148.13

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 197 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROGER D PARKER
 Mailing Address 1305 N MAIDSTONE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1187.96

Date of Receipt

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

Transaction ID: A2006-1941907

Amount of Each Receipt this Period

46.17

B. Full Name (Last, First, Middle Initial)
 MAYUR M PATEL
 Mailing Address 742 E PARKVIEW CT

City State Zip Code
 ROSELLE IL 60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

717.15

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762580

Amount of Each Receipt this Period

28.89

C. Full Name (Last, First, Middle Initial)
 MAYUR M PATEL
 Mailing Address 742 E PARKVIEW CT

City State Zip Code
 ROSELLE IL 60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.04

Date of Receipt

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

Transaction ID: A2006-1941700

Amount of Each Receipt this Period

28.89

SUBTOTAL of Receipts This Page (optional)

103.95

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: PAGE 198 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHARLES PAUL
Mailing Address 301 CAMELOT LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Stra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1632.70

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762429

Amount of Each Receipt this Period

66.19

B. Full Name (Last, First, Middle Initial)
CHARLES PAUL
Mailing Address 301 CAMELOT LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Stra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1698.89

Date of Receipt

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

Transaction ID: A2006-1941551

Amount of Each Receipt this Period

66.19

C. Full Name (Last, First, Middle Initial)
RONALD J PEPPING
Mailing Address 934 LEWIS PLACE

City State Zip Code
GENEVA IL 60134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ivantage Financial Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

707.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762616

Amount of Each Receipt this Period

28.43

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 199 / 301

(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)
RONALD J PEPPING

Mailing Address 934 LEWIS PLACE

City State Zip Code
GENEVA IL 60134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Ivantage Financial Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.43

Date of Receipt

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

Transaction ID: A2006-1941736

Amount of Each Receipt this Period

28.43

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

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1129.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762390

Amount of Each Receipt this Period

45.69

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

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.06

Date of Receipt

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

Transaction ID: A2006-1941512

Amount of Each Receipt this Period

45.69

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: PAGE 200 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
NANCY A PERRY

Mailing Address 3575 CALDERWOOD DR

City State Zip Code
 ROCKFORD IL 61114

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 ▼

412.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762637

Amount of Each Receipt this Period

16.65

B. Full Name (Last, First, Middle Initial)
NANCY A PERRY

Mailing Address 3575 CALDERWOOD DR

City State Zip Code
 ROCKFORD IL 61114

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 ▼

428.95

Date of Receipt

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

Transaction ID: A2006-1941757

Amount of Each Receipt this Period

16.65

C. Full Name (Last, First, Middle Initial)
JUDITH M PETRAY

Mailing Address 539 KELMORE ST

City State Zip Code
 MOSS BEACH CA 94038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.75

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762362

Amount of Each Receipt this Period

16.35

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: PAGE 201 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JUDITH M PETRAY
Mailing Address 539 KELMORE ST

City State Zip Code
MOSS BEACH CA 94038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.10

Date of Receipt

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

Transaction ID: A2006-1941484

Amount of Each Receipt this Period

16.35

B. Full Name (Last, First, Middle Initial)
STEVEN A PETTI
Mailing Address 580 SALCEDA DR

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1171.28

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762389

Amount of Each Receipt this Period

47.19

C. Full Name (Last, First, Middle Initial)
STEVEN A PETTI
Mailing Address 580 SALCEDA DR

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.47

Date of Receipt

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

Transaction ID: A2006-1941511

Amount of Each Receipt this Period

47.19

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 202 / 301

(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 (Last, First, Middle Initial)

A. JOHN C PINTOZZI

Mailing Address 2116 W CHURCHILL ST

City State Zip Code
 CHICAGO IL 60647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Finance -

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.90

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762533

Amount of Each Receipt this Period

62.70

Full Name (Last, First, Middle Initial)

B. JOHN C PINTOZZI

Mailing Address 2116 W CHURCHILL ST

City State Zip Code
 CHICAGO IL 60647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Finance -

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.60

Date of Receipt

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

Transaction ID: A2006-1941653

Amount of Each Receipt this Period

62.70

Full Name (Last, First, Middle Initial)

C. RICHARD E PORTER

Mailing Address 20827 36TH PL W

City State Zip Code
 LYNNWOOD WA 98036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Staff Claims Service Adju

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.75

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762778

Amount of Each Receipt this Period

10.13

SUBTOTAL of Receipts This Page (optional)

135.53

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: PAGE 203 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RICHARD E PORTER
 Mailing Address 20827 36TH PL W

City State Zip Code
 LYNNWOOD WA 98036

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Staff Claims Service Adju

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.88

Date of Receipt

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

Transaction ID: A2006-1941897

Amount of Each Receipt this Period

10.13

B. Full Name (Last, First, Middle Initial)
 DAVID J PRENDERGAST
 Mailing Address 2816 HAVEN LANE

City State Zip Code
 LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.85

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762382

Amount of Each Receipt this Period

35.25

C. Full Name (Last, First, Middle Initial)
 DAVID J PRENDERGAST
 Mailing Address 2816 HAVEN LANE

City State Zip Code
 LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

908.10

Date of Receipt

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

Transaction ID: A2006-1941504

Amount of Each Receipt this Period

35.25

SUBTOTAL of Receipts This Page (optional)

80.63

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 204 / 301

(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)
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 CompanyOccupation
AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762545

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 CompanyOccupation
AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.00

Date of Receipt

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

Transaction ID: A2006-1941665

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 CompanyOccupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762667

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 205 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. 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 ▼

526.43

Date of Receipt

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

Transaction ID: A2006-1941787

Amount of Each Receipt this Period

20.38

Full Name (Last, First, Middle Initial)

B. JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City State Zip Code
 ARLINGTON HGTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

677.35

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762802

Amount of Each Receipt this Period

28.74

Full Name (Last, First, Middle Initial)

C. JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City State Zip Code
 ARLINGTON HGTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

706.09

Date of Receipt

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

Transaction ID: A2006-1941921

Amount of Each Receipt this Period

28.74

SUBTOTAL of Receipts This Page (optional)

77.86

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 206 / 301

(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. JOSEPH P RATH

Mailing Address 359 STAFFORD COURT

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1341.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762502

Amount of Each Receipt this Period

54.32

Full Name (Last, First, Middle Initial)

B. JOSEPH P RATH

Mailing Address 359 STAFFORD COURT

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1396.15

Date of Receipt

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

Transaction ID: A2006-1941623

Amount of Each Receipt this Period

54.32

Full Name (Last, First, Middle Initial)

C. JOHN B REARDON

Mailing Address 441 KELLY LANE

City	State	Zip Code
CRYSTAL LAKE	IL	60012

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762368

Amount of Each Receipt this Period

40.08

SUBTOTAL of Receipts This Page (optional)

148.72

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 207 / 301

(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 (Last, First, Middle Initial)

A. JOHN B REARDON

Mailing Address 441 KELLY LANE

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.55

Date of Receipt

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

Transaction ID: A2006-1941490

Amount of Each Receipt this Period

40.08

Full Name (Last, First, Middle Initial)

B. CHARLES E RICE

Mailing Address 12 CHESTER ST

City State Zip Code
 ARDSLEY NY 10502

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 ▼

204.89

Date of Receipt

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

Transaction ID: A2006-1941522

Amount of Each Receipt this Period

7.94

Full Name (Last, First, Middle Initial)

C. JOSEPH J RICHARDSON

Mailing Address 1411 PARSONS LANE

City State Zip Code
 LOWER GWYNEDD PA 19002

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 ▼

1525.91

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762433

Amount of Each Receipt this Period

61.70

SUBTOTAL of Receipts This Page (optional)

109.72

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 208 / 301

(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 (Last, First, Middle Initial)

A. JOSEPH J RICHARDSON

Mailing Address 1411 PARSONS LANE

City State Zip Code
 LOWER GWYNEDD PA 19002

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 ▼

1587.61

Date of Receipt

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

Transaction ID: A2006-1941555

Amount of Each Receipt this Period

61.70

Full Name (Last, First, Middle Initial)

B. ROBIN R RICHMOND

Mailing Address 9 HAWTHORN GROVE CIRCLE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.40

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762659

Amount of Each Receipt this Period

24.68

Full Name (Last, First, Middle Initial)

C. ROBIN R RICHMOND

Mailing Address 9 HAWTHORN GROVE CIRCLE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.08

Date of Receipt

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

Transaction ID: A2006-1941779

Amount of Each Receipt this Period

24.68

SUBTOTAL of Receipts This Page (optional)

111.06

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: PAGE 209 / 301

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ANDREW T RIEDER

Mailing Address 7 ONEIDA LANE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Homeowner Initiative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1124.51

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762438

Amount of Each Receipt this Period

45.35

B. Full Name (Last, First, Middle Initial)
ANDREW T RIEDER

Mailing Address 7 ONEIDA LANE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Homeowner Initiative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1169.86

Date of Receipt

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

Transaction ID: A2006-1941560

Amount of Each Receipt this Period

45.35

C. Full Name (Last, First, Middle Initial)
JESSICA D RIVERA

Mailing Address 2055 LOCKRIDGE PLACE

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762799

Amount of Each Receipt this Period

45.25

SUBTOTAL of Receipts This Page (optional)

135.95

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: PAGE 210 / 301

(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 (Last, First, Middle Initial)

A. JESSICA D RIVERA

Mailing Address 2055 LOCKRIDGE PLACE

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
AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1165.79

Date of Receipt

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

Transaction ID: A2006-1941918

Amount of Each Receipt this Period

45.25

Full Name (Last, First, Middle Initial)

B. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
 OAK LAWN IL 60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

944.13

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762594

Amount of Each Receipt this Period

38.30

Full Name (Last, First, Middle Initial)

C. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
 OAK LAWN IL 60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.43

Date of Receipt

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

Transaction ID: A2006-1941714

Amount of Each Receipt this Period

38.30

SUBTOTAL of Receipts This Page (optional)

121.85

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 211 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CLAY F ROBERTS

Mailing Address 3075 Sanders Road Suite G2E

City State Zip Code
Northbrook IL 60062

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 ▼

826.09

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762789

Amount of Each Receipt this Period

34.02

B. Full Name (Last, First, Middle Initial)
CLAY F ROBERTS

Mailing Address 3075 Sanders Road Suite G2E

City State Zip Code
Northbrook IL 60062

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 ▼

860.11

Date of Receipt

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

Transaction ID: A2006-1941908

Amount of Each Receipt this Period

34.02

C. Full Name (Last, First, Middle Initial)
DANIEL P ROBERTS

Mailing Address 4374 W Anderson Rd

City State Zip Code
South Euclid OH 44121

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 ▼

497.35

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762426

Amount of Each Receipt this Period

20.25

SUBTOTAL of Receipts This Page (optional)

88.29

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 212 / 301

(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 (Last, First, Middle Initial)

A. DANIEL P ROBERTS

Mailing Address 4374 W Anderson Rd

City State Zip Code
 South Euclid OH 44121

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 ▼

517.60

Date of Receipt

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

Transaction ID: A2006-1941548

Amount of Each Receipt this Period

20.25

Full Name (Last, First, Middle Initial)

B. 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 ▼

1045.94

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762528

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

C. 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 ▼

1085.71

Date of Receipt

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

Transaction ID: A2006-1941649

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

99.79

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 213 / 301

(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)

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 CompanyOccupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762602

Amount of Each Receipt this Period

25.95

B.

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 CompanyOccupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

657.83

Date of Receipt

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

Transaction ID: A2006-1941722

Amount of Each Receipt this Period

25.95

C.

Full Name (Last, First, Middle Initial)

JACQUELINE A ROTHE

Mailing Address 4763 WELLINGTON DRIVE

City	State	Zip Code
LONG GROVE	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Distribution Support Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762796

Amount of Each Receipt this Period

16.27

SUBTOTAL of Receipts This Page (optional)

68.17

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 214 / 301

(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 (Last, First, Middle Initial)

A. JACQUELINE A ROTHE

Mailing Address 4763 WELLINGTON DRIVE

City State Zip Code
 LONG GROVE IL 60047

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 ▼

421.47

Date of Receipt

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

Transaction ID: A2006-1941915

Amount of Each Receipt this Period

16.27

Full Name (Last, First, Middle Initial)

B. 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 ▼

332.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762744

Amount of Each Receipt this Period

13.37

Full Name (Last, First, Middle Initial)

C. 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 ▼

345.67

Date of Receipt

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

Transaction ID: A2006-1941863

Amount of Each Receipt this Period

13.37

SUBTOTAL of Receipts This Page (optional)

43.01

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 301

(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)
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 CompanyOccupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2238.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762655

Amount of Each Receipt this Period

91.15

B. 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 CompanyOccupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2329.51

Date of Receipt

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

Transaction ID: A2006-1941775

Amount of Each Receipt this Period

91.15

C. Full Name (Last, First, Middle Initial)
CASSANDRA C RUSSELL

Mailing Address 2483 Titans Lane

City	State	Zip Code
Nashville	TN	37027

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762714

Amount of Each Receipt this Period

10.78

SUBTOTAL of Receipts This Page (optional)

193.08

TOTAL This Period (last page this line number only)

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

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FOR LINE NUMBER: PAGE 216 / 301

(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 (Last, First, Middle Initial)

A. CASSANDRA C RUSSELL

Mailing Address 2483 Titans Lane

City State Zip Code
 Nashville TN 37027

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 ▼

274.25

Date of Receipt

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

Transaction ID: A2006-1941833

Amount of Each Receipt this Period

10.99

Full Name (Last, First, Middle Initial)

B. DOREEN M RYAN

Mailing Address 17 ALSTON COURT

City State Zip Code
 RED BANK NJ 07701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762420

Amount of Each Receipt this Period

21.80

Full Name (Last, First, Middle Initial)

C. DOREEN M RYAN

Mailing Address 17 ALSTON COURT

City State Zip Code
 RED BANK NJ 07701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.80

Date of Receipt

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

Transaction ID: A2006-1941542

Amount of Each Receipt this Period

21.80

SUBTOTAL of Receipts This Page (optional)

54.59

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

PAUL R RYSKE

Mailing Address 898 E. LONGWOOD DR.

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.54

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762526

Amount of Each Receipt this Period

19.88

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

PAUL R RYSKE

Mailing Address 898 E. LONGWOOD DR.

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.42

Date of Receipt

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

Transaction ID: A2006-1941647

Amount of Each Receipt this Period

19.88

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

MICHAEL A SALCONE JR

Mailing Address 3144 WEXFORD BLVD.

City State Zip Code
 STOW OH 44224

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 ▼

202.52

Date of Receipt

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

Transaction ID: A2006-1941615

Amount of Each Receipt this Period

7.82

SUBTOTAL of Receipts This Page (optional)

47.58

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 218 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 PATRICK J SARB
 Mailing Address 4517 WAUBANSIE LANE

City State Zip Code
 LISLE IL 60532

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 ▼

293.20

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762681

Amount of Each Receipt this Period

11.83

B. Full Name (Last, First, Middle Initial)
 PATRICK J SARB
 Mailing Address 4517 WAUBANSIE LANE

City State Zip Code
 LISLE IL 60532

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 ▼

305.03

Date of Receipt

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

Transaction ID: A2006-1941801

Amount of Each Receipt this Period

11.83

C. Full Name (Last, First, Middle Initial)
 MICHAEL A SCARDINA
 Mailing Address 51 SOUTH ROYAL OAK

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.66

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762504

Amount of Each Receipt this Period

27.73

SUBTOTAL of Receipts This Page (optional)

51.39

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 219 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL A SCARDINA
Mailing Address 51 SOUTH ROYAL OAK

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.39

Date of Receipt

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

Transaction ID: A2006-1941625

Amount of Each Receipt this Period

27.73

B. Full Name (Last, First, Middle Initial)
PATRICK J SCHNEIDER
Mailing Address 210 NORTH TRAIL

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

686.85

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762642

Amount of Each Receipt this Period

27.66

C. Full Name (Last, First, Middle Initial)
PATRICK J SCHNEIDER
Mailing Address 210 NORTH TRAIL

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.51

Date of Receipt

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

Transaction ID: A2006-1941762

Amount of Each Receipt this Period

27.66

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 220 / 301

(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 (Last, First, Middle Initial)

A. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP HR Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1180.28

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762423

Amount of Each Receipt this Period

47.97

Full Name (Last, First, Middle Initial)

B. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP HR Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1228.25

Date of Receipt

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

Transaction ID: A2006-1941545

Amount of Each Receipt this Period

47.97

Full Name (Last, First, Middle Initial)

C. DALE J SCHUELLER

Mailing Address 2941 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
Field Administration Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.40

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762742

Amount of Each Receipt this Period

15.16

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 221 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DALE J SCHUELLER

Mailing Address 2941 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
Field Administration Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.56

Date of Receipt

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

Transaction ID: A2006-1941861

Amount of Each Receipt this Period

15.16

B. Full Name (Last, First, Middle Initial)
DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.69

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762575

Amount of Each Receipt this Period

22.15

C. Full Name (Last, First, Middle Initial)
DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.84

Date of Receipt

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

Transaction ID: A2006-1941695

Amount of Each Receipt this Period

22.15

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 222 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL D SCHUSTER

Mailing Address 526 LANGE COURT

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼

389.90

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762776

Amount of Each Receipt this Period

15.76

B. Full Name (Last, First, Middle Initial)
MICHAEL D SCHUSTER

Mailing Address 526 LANGE COURT

City State Zip Code
LIBERTYVILLE IL 60048

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 ▼

405.66

Date of Receipt

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

Transaction ID: A2006-1941895

Amount of Each Receipt this Period

15.76

C. 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 ▼

964.34

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762696

Amount of Each Receipt this Period

38.89

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: PAGE 223 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1003.23

Date of Receipt

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

Transaction ID: A2006-1941816

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 CompanyOccupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762398

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 CompanyOccupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.10

Date of Receipt

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

Transaction ID: A2006-1941520

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)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT M SCULLY

Mailing Address 302 NORTH VILLAGE ST

City State Zip Code
CELEBRATION **FL** **34747**

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 ▼

495.20

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762383

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

B. ROBERT M SCULLY

Mailing Address 302 NORTH VILLAGE ST

City State Zip Code
CELEBRATION **FL** **34747**

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 ▼

515.08

Date of Receipt

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

Transaction ID: A2006-1941505

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

C. DANNY R SELLERS

Mailing Address 5903 87TH ST

City State Zip Code
LUBBOCK **TX** **79424**

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 ▼

575.65

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762729

Amount of Each Receipt this Period

23.16

SUBTOTAL of Receipts This Page (optional)

62.92

TOTAL This Period (last page this line number only)

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

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FOR LINE NUMBER: PAGE 225 / 301

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

DANNY R SELLERS

Mailing Address 5903 87TH ST

City State Zip Code
 LUBBOCK TX 79424

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 ▼

598.81

Date of Receipt

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

Transaction ID: A2006-1941848

Amount of Each Receipt this Period

23.16

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

STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
 Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

724.25

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762631

Amount of Each Receipt this Period

29.25

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

STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
 Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.50

Date of Receipt

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

Transaction ID: A2006-1941751

Amount of Each Receipt this Period

29.25

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
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FOR LINE NUMBER: PAGE 226 / 301

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Property/C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1885.41

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762601

Amount of Each Receipt this Period

76.15

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

STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Property/C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1961.56

Date of Receipt

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

Transaction ID: A2006-1941721

Amount of Each Receipt this Period

76.15

C. 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 ▼

475.90

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762521

Amount of Each Receipt this Period

19.22

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 227 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

495.12

Date of Receipt

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

Transaction ID: A2006-1941642

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 ▼

339.54

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762453

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 ▼

352.80

Date of Receipt

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

Transaction ID: A2006-1941575

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: PAGE 228 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

544.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762678

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 ▼

565.76

Date of Receipt

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

Transaction ID: A2006-1941798

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 ▼

682.45

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762411

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: PAGE 229 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

709.92

Date of Receipt

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

Transaction ID: A2006-1941533

Amount of Each Receipt this Period

27.47

B. Full Name (Last, First, Middle Initial)
 KIMBALL S SIMON
 Mailing Address 11 WEHRHEIM

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.90

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762757

Amount of Each Receipt this Period

34.98

C. Full Name (Last, First, Middle Initial)
 KIMBALL S SIMON
 Mailing Address 11 WEHRHEIM

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.88

Date of Receipt

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

Transaction ID: A2006-1941876

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: PAGE 230 / 301

(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 (Last, First, Middle Initial)

A. ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City State Zip Code
 HIGHLAND PARK IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.15

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762531

Amount of Each Receipt this Period

26.51

Full Name (Last, First, Middle Initial)

B. ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City State Zip Code
 HIGHLAND PARK IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.66

Date of Receipt

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

Transaction ID: A2006-1941652

Amount of Each Receipt this Period

26.51

Full Name (Last, First, Middle Initial)

C. JOHN G SINICKI

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 ▼

451.94

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762484

Amount of Each Receipt this Period

19.37

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: PAGE 231 / 301

(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 (Last, First, Middle Initial)

A. JOHN G SINICKI

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 ▼

471.31

Date of Receipt

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

Transaction ID: A2006-1941605

Amount of Each Receipt this Period

19.37

Full Name (Last, First, Middle Initial)

B. 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 ▼

621.35

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762542

Amount of Each Receipt this Period

25.07

Full Name (Last, First, Middle Initial)

C. 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 ▼

646.42

Date of Receipt

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

Transaction ID: A2006-1941662

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 232 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

KEVIN R SLAWIN

Mailing Address 1316 CRESTWOOD DRIVE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP AF Admin Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.10

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762640

Amount of Each Receipt this Period

39.03

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

KEVIN R SLAWIN

Mailing Address 1316 CRESTWOOD DRIVE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP AF Admin Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.13

Date of Receipt

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

Transaction ID: A2006-1941760

Amount of Each Receipt this Period

39.03

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

KIMBERLY J SLOANE

Mailing Address 378 N. VISTA AVE

City State Zip Code
 LOMBARD IL 60148

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.20

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762620

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)

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

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

FOR LINE NUMBER: PAGE 233 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KIMBERLY J SLOANE
Mailing Address 378 N. VISTA AVE

City State Zip Code
LOMBARD IL 60148

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.46

Date of Receipt

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

Transaction ID: A2006-1941740

Amount of Each Receipt this Period

36.26

B. Full Name (Last, First, Middle Initial)
ANN M SMITH
Mailing Address 20380 STILLHOUSE BRANCH PLACE

City State Zip Code
POTOMAC FALLS VA 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 ▼

324.65

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762370

Amount of Each Receipt this Period

13.11

C. Full Name (Last, First, Middle Initial)
ANN M SMITH
Mailing Address 20380 STILLHOUSE BRANCH PLACE

City State Zip Code
POTOMAC FALLS VA 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 ▼

337.76

Date of Receipt

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

Transaction ID: A2006-1941492

Amount of Each Receipt this Period

13.11

SUBTOTAL of Receipts This Page (optional)

62.48

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 234 / 301

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BENJAMIN M SMITH
Mailing Address 1008 CHESAPEAK BLVD

City State Zip Code
GRAYSLAKE IL 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 ▼

404.15

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762469

Amount of Each Receipt this Period

16.29

B. Full Name (Last, First, Middle Initial)
BENJAMIN M SMITH
Mailing Address 1008 CHESAPEAK BLVD

City State Zip Code
GRAYSLAKE IL 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 ▼

420.44

Date of Receipt

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

Transaction ID: A2006-1941591

Amount of Each Receipt this Period

16.29

C. Full Name (Last, First, Middle Initial)
CHARLES M SMITH
Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.08

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762701

Amount of Each Receipt this Period

29.51

SUBTOTAL of Receipts This Page (optional)

62.09

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 235 / 301

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code
 Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.59

Date of Receipt

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

Transaction ID: A2006-1941821

Amount of Each Receipt this Period

29.51

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

ELIAS SMITH

Mailing Address 2751 SW BEAR PAW TRAIL

City State Zip Code
 PALM CITY FL 34990

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 ▼

220.30

Date of Receipt

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

Transaction ID: A2006-1941539

Amount of Each Receipt this Period

22.03

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

J E SMITH

Mailing Address 310 WHITMORE 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
VP Distribution and Chann

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1411.62

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762604

Amount of Each Receipt this Period

57.05

SUBTOTAL of Receipts This Page (optional)

108.59

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 236 / 301

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

J E SMITH

Mailing Address 310 WHITMORE 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
VP Distribution and Chann

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1468.67

Date of Receipt

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

Transaction ID: A2006-1941724

Amount of Each Receipt this Period

57.05

B.

Full Name (Last, First, Middle Initial)

KENNETH D SMITH

Mailing Address 619 N. HUMPHREY AVE.

City State Zip Code
 OAK PARK IL 60302

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 ▼

362.35

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762635

Amount of Each Receipt this Period

14.60

C.

Full Name (Last, First, Middle Initial)

KENNETH D SMITH

Mailing Address 619 N. HUMPHREY AVE.

City State Zip Code
 OAK PARK IL 60302

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 ▼

376.95

Date of Receipt

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

Transaction ID: A2006-1941755

Amount of Each Receipt this Period

14.60

SUBTOTAL of Receipts This Page (optional)

86.25

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 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 ▼

634.60

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762747

Amount of Each Receipt this Period

25.58

B. Full Name (Last, First, Middle Initial)
 RANDALL D SNITTJER
 Mailing Address 11423 E. Blue Sky Drive

City State Zip Code
 Scottsdale AZ 85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.18

Date of Receipt

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

Transaction ID: A2006-1941866

Amount of Each Receipt this Period

25.58

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 ▼

328.10

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762365

Amount of Each Receipt this Period

13.25

SUBTOTAL of Receipts This Page (optional)

64.41

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: PAGE 238 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

341.35

Date of Receipt

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

Transaction ID: A2006-1941487

Amount of Each Receipt this Period

13.25

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

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1755.63

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762687

Amount of Each Receipt this Period

70.90

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

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1826.53

Date of Receipt

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

Transaction ID: A2006-1941807

Amount of Each Receipt this Period

70.90

SUBTOTAL of Receipts This Page (optional)

155.05

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 239 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KEVIN A SPATARO
Mailing Address 1663 SARATOGA LANE

City State Zip Code
GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Account Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.36

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762661

Amount of Each Receipt this Period

25.31

B. Full Name (Last, First, Middle Initial)
KEVIN A SPATARO
Mailing Address 1663 SARATOGA LANE

City State Zip Code
GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Account Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.67

Date of Receipt

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

Transaction ID: A2006-1941781

Amount of Each Receipt this Period

25.31

C. Full Name (Last, First, Middle Initial)
EDWIN M SPECHT
Mailing Address 740 AMBRIA DRIVE

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.25

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762441

Amount of Each Receipt this Period

32.98

SUBTOTAL of Receipts This Page (optional)

83.60

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 240 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWIN M SPECHT
Mailing Address 740 AMBRIA DRIVE

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.23

Date of Receipt

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

Transaction ID: A2006-1941563

Amount of Each Receipt this Period

32.98

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 ▼

643.51

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762654

Amount of Each Receipt this Period

25.90

C. Full Name (Last, First, Middle Initial)
JAMES G SPORLEDER
Mailing Address 20 LAKESIDE LANE

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.41

Date of Receipt

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

Transaction ID: A2006-1941774

Amount of Each Receipt this Period

25.90

SUBTOTAL of Receipts This Page (optional)

84.78

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 241 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

927.77

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762508

Amount of Each Receipt this Period

37.99

Full Name (Last, First, Middle Initial)

B. 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 ▼

965.76

Date of Receipt

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

Transaction ID: A2006-1941629

Amount of Each Receipt this Period

37.99

Full Name (Last, First, Middle Initial)

C. 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 ▼

296.95

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762586

Amount of Each Receipt this Period

11.97

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: PAGE 242 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BARBARA J STEELE

Mailing Address 730 CREEKSID 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 ▼

308.92

Date of Receipt

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

Transaction ID: A2006-1941706

Amount of Each Receipt this Period

11.97

B. 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 ▼

887.22

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762468

Amount of Each Receipt this Period

37.38

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 ▼

924.60

Date of Receipt

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

Transaction ID: A2006-1941590

Amount of Each Receipt this Period

37.38

SUBTOTAL of Receipts This Page (optional)

86.73

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 243 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LOUIE A STEPHENSON

Mailing Address 1775 FOREST CREEK DR.

City State Zip Code
JACKSONVILLE FL 32225

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 ▼

333.20

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762727

Amount of Each Receipt this Period

13.38

B. Full Name (Last, First, Middle Initial)
LOUIE A STEPHENSON

Mailing Address 1775 FOREST CREEK DR.

City State Zip Code
JACKSONVILLE FL 32225

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 ▼

346.58

Date of Receipt

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

Transaction ID: A2006-1941846

Amount of Each Receipt this Period

13.38

C. Full Name (Last, First, Middle Initial)
GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

888.05

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762480

Amount of Each Receipt this Period

35.78

SUBTOTAL of Receipts This Page (optional)

62.54

TOTAL This Period (last page this line 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 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) GARY S STERE			Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6	
Mailing Address 2015 SELVA MADERA COURT			Transaction ID: A2006-1941601	
City State Zip Code ATLANTIC BEACH FL 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 ▼ 923.83		
B. Full Name (Last, First, Middle Initial) MYRON E STOUFFER			Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6	
Mailing Address 1528 JESSICA LANE			Transaction ID: A2006-1762475	
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 ▼ 462.83		
C. Full Name (Last, First, Middle Initial) MYRON E STOUFFER			Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6	
Mailing Address 1528 JESSICA LANE			Transaction ID: A2006-1941597	
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 ▼ 481.64		

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 245 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHRISTINE A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.77

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762357

Amount of Each Receipt this Period

23.87

B. Full Name (Last, First, Middle Initial)
CHRISTINE A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.64

Date of Receipt

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

Transaction ID: A2006-1941479

Amount of Each Receipt this Period

23.87

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

Mailing Address 4018 BERRYWOOD DRIVE

City State Zip Code
SEAFORD NY 11783

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 ▼

317.60

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762403

Amount of Each Receipt this Period

12.79

SUBTOTAL of Receipts This Page (optional)

60.53

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: PAGE 246 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DANIEL J SULLIVAN

Mailing Address 4018 BERRYWOOD DRIVE

City State Zip Code
SEAFORD NY 11783

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 ▼

330.39

Date of Receipt

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

Transaction ID: A2006-1941525

Amount of Each Receipt this Period

12.79

B. Full Name (Last, First, Middle Initial)
KEVIN T SULLIVAN

Mailing Address 221 CARRIAGE HILL CIR

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 -Corp Ethn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2258.45

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762760

Amount of Each Receipt this Period

91.08

C. Full Name (Last, First, Middle Initial)
KEVIN T SULLIVAN

Mailing Address 221 CARRIAGE HILL CIR

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 -Corp Ethn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2349.53

Date of Receipt

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

Transaction ID: A2006-1941879

Amount of Each Receipt this Period

91.08

SUBTOTAL of Receipts This Page (optional)

194.95

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 247 / 301

(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 (Last, First, Middle Initial)

A. KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
 ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Enterprise Applicatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1215.85

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762536

Amount of Each Receipt this Period

48.97

Full Name (Last, First, Middle Initial)

B. KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
 ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Enterprise Applicatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1264.82

Date of Receipt

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

Transaction ID: A2006-1941656

Amount of Each Receipt this Period

48.97

Full Name (Last, First, Middle Initial)

C. CASEY J SYLLA

Mailing Address 32 RIDERWOOD

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President Allstate Financ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3482.08

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762685

Amount of Each Receipt this Period

140.77

SUBTOTAL of Receipts This Page (optional)

238.71

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 248 / 301

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CASEY J SYLLA
Mailing Address 32 RIDERWOOD

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President Allstate Financ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3622.85

Date of Receipt

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

Transaction ID: A2006-1941805

Amount of Each Receipt this Period

140.77

B. Full Name (Last, First, Middle Initial)
KIMBERLY A SYME
Mailing Address 1609 SURRIDGE CT

City State Zip Code
MUNDELEIN IL 60060

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 ▼

360.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762554

Amount of Each Receipt this Period

14.54

C. Full Name (Last, First, Middle Initial)
KIMBERLY A SYME
Mailing Address 1609 SURRIDGE CT

City State Zip Code
MUNDELEIN IL 60060

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 ▼

375.24

Date of Receipt

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

Transaction ID: A2006-1941674

Amount of Each Receipt this Period

14.54

SUBTOTAL of Receipts This Page (optional)

169.85

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 249 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City State Zip Code
 ELK GROVE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

907.95

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762579

Amount of Each Receipt this Period

36.51

Full Name (Last, First, Middle Initial)

B. JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City State Zip Code
 ELK GROVE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

944.46

Date of Receipt

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

Transaction ID: A2006-1941699

Amount of Each Receipt this Period

36.51

Full Name (Last, First, Middle Initial)

C. 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 Servic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.20

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762547

Amount of Each Receipt this Period

13.44

SUBTOTAL of Receipts This Page (optional)

86.46

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 250 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

345.64

Date of Receipt

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

Transaction ID: A2006-1941667

Amount of Each Receipt this Period

13.44

B. 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 ▼

515.23

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762409

Amount of Each Receipt this Period

20.85

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 ▼

536.08

Date of Receipt

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

Transaction ID: A2006-1941531

Amount of Each Receipt this Period

20.85

SUBTOTAL of Receipts This Page (optional)

55.14

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 251 / 301

(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 (Last, First, Middle Initial)

A. JANICE M TAYLOR

Mailing Address 7335 ATHLONE

City State Zip Code
 HOUSTON TX 77088

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.70

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762731

Amount of Each Receipt this Period

21.94

Full Name (Last, First, Middle Initial)

B. JANICE M TAYLOR

Mailing Address 7335 ATHLONE

City State Zip Code
 HOUSTON TX 77088

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.64

Date of Receipt

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

Transaction ID: A2006-1941850

Amount of Each Receipt this Period

21.94

Full Name (Last, First, Middle Initial)

C. LINDSAY F TAYLOR

Mailing Address 217 E. SHERIDAN PLACE

City State Zip Code
 LAKE BLUFF IL 60044

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 ▼

408.70

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762795

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

60.23

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 252 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

LINDSAY F TAYLOR

Mailing Address 217 E. SHERIDAN PLACE

City State Zip Code
 LAKE BLUFF IL 60044

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 ▼

425.05

Date of Receipt

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

Transaction ID: A2006-1941914

Amount of Each Receipt this Period

16.35

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

TIMOTHY J TAYLOR

Mailing Address 5314 RENEE AVE.

City State Zip Code
 CRYSTAL LAKE IL 60014

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 ▼

436.90

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762464

Amount of Each Receipt this Period

17.57

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

TIMOTHY J TAYLOR

Mailing Address 5314 RENEE AVE.

City State Zip Code
 CRYSTAL LAKE IL 60014

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 ▼

454.47

Date of Receipt

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

Transaction ID: A2006-1941586

Amount of Each Receipt this Period

17.57

SUBTOTAL of Receipts This Page (optional)

51.49

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 253 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PHILLIP J TELGENHOFF

Mailing Address 1631 DAUNTING DRIVE

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
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.20

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762781

Amount of Each Receipt this Period

14.87

B. Full Name (Last, First, Middle Initial)
PHILLIP J TELGENHOFF

Mailing Address 1631 DAUNTING DRIVE

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
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.07

Date of Receipt

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

Transaction ID: A2006-1941900

Amount of Each Receipt this Period

14.87

C. Full Name (Last, First, Middle Initial)
SEAN D THAKUR

Mailing Address 4657 LAKE POINT CIRCLE

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Service Center Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.60

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762721

Amount of Each Receipt this Period

13.73

SUBTOTAL of Receipts This Page (optional)

43.47

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 254 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
SEAN D THAKUR

Mailing Address 4657 LAKE POINT CIRCLE

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Service Center Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.33

Date of Receipt

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

Transaction ID: A2006-1941840

Amount of Each Receipt this Period

13.73

B. Full Name (Last, First, Middle Initial)
MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City State Zip Code
CHICAGO IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-PRODUCT NON-STANDARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.46

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762743

Amount of Each Receipt this Period

23.95

C. Full Name (Last, First, Middle Initial)
MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City State Zip Code
CHICAGO IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-PRODUCT NON-STANDARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

619.41

Date of Receipt

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

Transaction ID: A2006-1941862

Amount of Each Receipt this Period

23.95

SUBTOTAL of Receipts This Page (optional)

61.63

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 255 / 301

(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 (Last, First, Middle Initial)

A. W. J THOMPSON

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
 VERNON HILLS IL 60061

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 ▼

746.15

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762465

Amount of Each Receipt this Period

30.05

Full Name (Last, First, Middle Initial)

B. W. J THOMPSON

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
 VERNON HILLS IL 60061

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 ▼

776.20

Date of Receipt

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

Transaction ID: A2006-1941587

Amount of Each Receipt this Period

30.05

Full Name (Last, First, Middle Initial)

C. ROBERT J TIERNEY

Mailing Address 6628 RFD-CARRIAGE WAY

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Procurement Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762551

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

79.88

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: PAGE 256 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

ROBERT J TIERNEY

Mailing Address 6628 RFD-CARRIAGE WAY

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Procurement Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.88

Date of Receipt

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

Transaction ID: A2006-1941671

Amount of Each Receipt this Period

19.88

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

LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP ENCOMPASS FIELD DISTR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

914.83

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762762

Amount of Each Receipt this Period

37.03

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

LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP ENCOMPASS FIELD DISTR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

951.86

Date of Receipt

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

Transaction ID: A2006-1941881

Amount of Each Receipt this Period

37.03

SUBTOTAL of Receipts This Page (optional)

93.94

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 257 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT E TRANSON

Mailing Address 2644 N DOUGLAS

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Strategic Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.45

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762591

Amount of Each Receipt this Period

26.32

B. Full Name (Last, First, Middle Initial)
ROBERT E TRANSON

Mailing Address 2644 N DOUGLAS

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Strategic Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

679.77

Date of Receipt

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

Transaction ID: A2006-1941711

Amount of Each Receipt this Period

26.32

C. Full Name (Last, First, Middle Initial)
MICHAEL J TREVINO

Mailing Address 1840 N. SAINT ANDREW DR.

City State Zip Code
 VERNON HILLS IL 60061

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 ▼

754.95

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762732

Amount of Each Receipt this Period

30.46

SUBTOTAL of Receipts This Page (optional)

83.10

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 258 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) MICHAEL J TREVINO Mailing Address 1840 N. SAINT ANDREW DR. City VERNON HILLS State IL Zip Code 60061 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 ▼ 785.41			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1941851 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">30.46</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	6	30.46									
M	M	/	D	D	/	Y	Y	Y	Y																								
1	2		2	2		2	0	0	6																								
30.46																																	
B. Full Name (Last, First, Middle Initial) JOSEPH V TRIPODI Mailing Address 565 E DEERPATH RD City LAKE FOREST State IL Zip Code 60045 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation SVP Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2456.53			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1762791 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">99.23</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	6	99.23									
M	M	/	D	D	/	Y	Y	Y	Y																								
1	2		0	8		2	0	0	6																								
99.23																																	
C. Full Name (Last, First, Middle Initial) JOSEPH V TRIPODI Mailing Address 565 E DEERPATH RD City LAKE FOREST State IL Zip Code 60045 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation SVP Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2555.76			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1941910 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">99.23</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	6	99.23									
M	M	/	D	D	/	Y	Y	Y	Y																								
1	2		2	2		2	0	0	6																								
99.23																																	

SUBTOTAL of Receipts This Page (optional)

228.92

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 259 / 301

(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 (Last, First, Middle Initial)

A. DENNIS M TRUSCH

Mailing Address 0s640 Preston Circle

City State Zip Code
 Geneva IL 60134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Education and Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.55

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762456

Amount of Each Receipt this Period

12.72

Full Name (Last, First, Middle Initial)

B. DENNIS M TRUSCH

Mailing Address 0s640 Preston Circle

City State Zip Code
 Geneva IL 60134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Education and Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.27

Date of Receipt

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

Transaction ID: A2006-1941578

Amount of Each Receipt this Period

12.72

Full Name (Last, First, Middle Initial)

C. MELINDA S TUNNER

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.07

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762716

Amount of Each Receipt this Period

42.70

SUBTOTAL of Receipts This Page (optional)

68.14

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 260 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MELINDA S TUNNER
Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1092.77

Date of Receipt

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

Transaction ID: A2006-1941835

Amount of Each Receipt this Period

42.70

B. Full Name (Last, First, Middle Initial)
RICHARD D TURANO
Mailing Address 4960 S CHESTER ST

City State Zip Code
ENGLEWOOD CO 80111

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 ▼

426.55

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762388

Amount of Each Receipt this Period

17.21

C. Full Name (Last, First, Middle Initial)
RICHARD D TURANO
Mailing Address 4960 S CHESTER ST

City State Zip Code
ENGLEWOOD CO 80111

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 ▼

443.76

Date of Receipt

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

Transaction ID: A2006-1941510

Amount of Each Receipt this Period

17.21

SUBTOTAL of Receipts This Page (optional)

77.12

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: PAGE 261 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

DAVID J UNROE

Mailing Address 326 ELM CT.

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762784

Amount of Each Receipt this Period

19.88

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

DAVID J UNROE

Mailing Address 326 ELM CT.

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.88

Date of Receipt

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

Transaction ID: A2006-1941903

Amount of Each Receipt this Period

19.88

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

JEFFREY W URE

Mailing Address 609 S. KENNICOTT 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
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.55

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762612

Amount of Each Receipt this Period

8.85

SUBTOTAL of Receipts This Page (optional)

48.61

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 262 / 301

(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 (Last, First, Middle Initial)

A. JEFFREY W URE

Mailing Address 609 S. KENNICOTT 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
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.40

Date of Receipt

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

Transaction ID: A2006-1941732

Amount of Each Receipt this Period

8.85

Full Name (Last, First, Middle Initial)

B. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1163.29

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762598

Amount of Each Receipt this Period

47.10

Full Name (Last, First, Middle Initial)

C. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1216.04

Date of Receipt

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

Transaction ID: A2006-1941718

Amount of Each Receipt this Period

52.75

SUBTOTAL of Receipts This Page (optional)

108.70

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 263 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
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 ▼

445.90

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762539

Amount of Each Receipt this Period

18.04

B. 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 ▼

463.94

Date of Receipt

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

Transaction ID: A2006-1941659

Amount of Each Receipt this Period

18.04

C. Full Name (Last, First, Middle Initial)
JOHN W VAN ETEN
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 ▼

397.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762646

Amount of Each Receipt this Period

15.90

SUBTOTAL of Receipts This Page (optional)

51.98

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 264 / 301

(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 (Last, First, Middle Initial)

A. JOHN W VAN ETEN

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 ▼

413.30

Date of Receipt

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

Transaction ID: A2006-1941766

Amount of Each Receipt this Period

15.90

Full Name (Last, First, Middle Initial)

B. KIMBERLY VAN NOSTERN

Mailing Address 660 PRESTWICK LANE #205

City State Zip Code
 WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Information Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.86

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762786

Amount of Each Receipt this Period

23.60

Full Name (Last, First, Middle Initial)

C. KIMBERLY VAN NOSTERN

Mailing Address 660 PRESTWICK LANE #205

City State Zip Code
 WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Information Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.46

Date of Receipt

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

Transaction ID: A2006-1941905

Amount of Each Receipt this Period

23.60

SUBTOTAL of Receipts This Page (optional)

63.10

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 265 / 301

(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)
LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762611

Amount of Each Receipt this Period

11.47

B. Full Name (Last, First, Middle Initial)
LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.97

Date of Receipt

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

Transaction ID: A2006-1941731

Amount of Each Receipt this Period

11.47

C. Full Name (Last, First, Middle Initial)
WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762535

Amount of Each Receipt this Period

32.70

SUBTOTAL of Receipts This Page (optional)

55.64

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: PAGE 266 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

849.65

Date of Receipt

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

Transaction ID: A2006-1941655

Amount of Each Receipt this Period

32.70

B.

Full Name (Last, First, Middle Initial)

PATRICIA C VANLAMMEREN

Mailing Address 9868 PALACE GREEN WAY

City	State	Zip Code
VIENNA	VA	22181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1284.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762756

Amount of Each Receipt this Period

51.82

C.

Full Name (Last, First, Middle Initial)

PATRICIA C VANLAMMEREN

Mailing Address 9868 PALACE GREEN WAY

City	State	Zip Code
VIENNA	VA	22181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.05

Date of Receipt

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

Transaction ID: A2006-1941875

Amount of Each Receipt this Period

51.82

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: PAGE 267 / 301

(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) BILL VASIOLOGAMBROS Mailing Address 1309 S. PINE AVE City ARLINGTON HTS. State IL Zip Code 60005 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 ▼ 393.95		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1762669 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">15.88</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	6	15.88									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	2		0	8		2	0	0	6																							
15.88																																
B. Full Name (Last, First, Middle Initial) BILL VASIOLOGAMBROS Mailing Address 1309 S. PINE AVE City ARLINGTON HTS. State IL Zip Code 60005 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 ▼ 409.83		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1941789 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">15.88</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	0	6	15.88									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	2		2	2		2	0	0	6																							
15.88																																
C. Full Name (Last, First, Middle Initial) RICHARD VAVRA Mailing Address 2514 S WESLEY AVENUE City BERWYN State IL Zip Code 60402 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 ▼ 932.55		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-1762527 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">37.52</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	6	37.52									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	2		0	8		2	0	0	6																							
37.52																																

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: PAGE 268 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RICHARD VAVRA
 Mailing Address 2514 S WESLEY AVENUE

City State Zip Code
 BERWYN IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

970.07

Date of Receipt

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

Transaction ID: A2006-1941648

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 ▼

1840.94

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762718

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 ▼

1915.16

Date of Receipt

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

Transaction ID: A2006-1941837

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: PAGE 269 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

1603.11

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762404

Amount of Each Receipt this Period

64.83

Full Name (Last, First, Middle Initial)

B. 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 ▼

1667.94

Date of Receipt

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

Transaction ID: A2006-1941526

Amount of Each Receipt this Period

64.83

Full Name (Last, First, Middle Initial)

C. JOAN H WALKER

Mailing Address 850 N. Riverwoods Road

City State Zip Code
Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Corp. Rel.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.35

Date of Receipt

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

Transaction ID: A2006-1941924

Amount of Each Receipt this Period

43.27

SUBTOTAL of Receipts This Page (optional)

172.93

TOTAL This Period (last page this line 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 270 / 301

(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)
MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City State Zip Code
CLOVIS CA 93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

707.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762499

Amount of Each Receipt this Period

28.43

B. Full Name (Last, First, Middle Initial)
MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City State Zip Code
CLOVIS CA 93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.43

Date of Receipt

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

Transaction ID: A2006-1941620

Amount of Each Receipt this Period

28.43

C. Full Name (Last, First, Middle Initial)
ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
DIRECTOR CREDIT DEPARTMEN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	0	6

Transaction ID: A2006-1762479

Amount of Each Receipt this Period

48.47

SUBTOTAL of Receipts This Page (optional)

105.33

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 271 / 301

(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)
ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
DIRECTOR CREDIT DEPARTMEN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1299.22

Date of Receipt

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

Transaction ID: A2006-1941600

Amount of Each Receipt this Period

48.47

B. Full Name (Last, First, Middle Initial)
THOMAS M WARDEN

Mailing Address 146 LA GRANDE

City State Zip Code
MOSS BEACH CA 94038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Research Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762492

Amount of Each Receipt this Period

30.69

C. Full Name (Last, First, Middle Initial)
THOMAS M WARDEN

Mailing Address 146 LA GRANDE

City State Zip Code
MOSS BEACH CA 94038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Research Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.83

Date of Receipt

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

Transaction ID: A2006-1941613

Amount of Each Receipt this Period

30.69

SUBTOTAL of Receipts This Page (optional)

109.85

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 272 / 301

(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 (Last, First, Middle Initial)

A. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Procurement Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

817.85

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762666

Amount of Each Receipt this Period

33.09

Full Name (Last, First, Middle Initial)

B. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Procurement Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.94

Date of Receipt

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

Transaction ID: A2006-1941786

Amount of Each Receipt this Period

33.09

Full Name (Last, First, Middle Initial)

C. 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 ▼

381.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762769

Amount of Each Receipt this Period

15.37

SUBTOTAL of Receipts This Page (optional)

81.55

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 273 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

396.67

Date of Receipt

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

Transaction ID: A2006-1941888

Amount of Each Receipt this Period

15.37

Full Name (Last, First, Middle Initial)

B. 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 ▼

305.30

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762750

Amount of Each Receipt this Period

12.28

Full Name (Last, First, Middle Initial)

C. 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 ▼

317.58

Date of Receipt

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

Transaction ID: A2006-1941869

Amount of Each Receipt this Period

12.28

SUBTOTAL of Receipts This Page (optional)

39.93

TOTAL This Period (last page this line 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 274 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

1313.42

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762516

Amount of Each Receipt this Period

53.15

Full Name (Last, First, Middle Initial)

B. 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 ▼

1366.57

Date of Receipt

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

Transaction ID: A2006-1941637

Amount of Each Receipt this Period

53.15

Full Name (Last, First, Middle Initial)

C. 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 ▼

743.88

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762745

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**

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or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 / 301

(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 (Last, First, Middle Initial)

A. 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 ▼

774.31

Date of Receipt

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

Transaction ID: A2006-1941864

Amount of Each Receipt this Period

30.43

Full Name (Last, First, Middle Initial)

B. JEROME WHITE

Mailing Address 5081 OVERLOOK DR.

City State Zip Code
 ROSWELL GA 30075

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 ▼

267.95

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762416

Amount of Each Receipt this Period

10.76

Full Name (Last, First, Middle Initial)

C. JEROME WHITE

Mailing Address 5081 OVERLOOK DR.

City State Zip Code
 ROSWELL GA 30075

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 ▼

278.71

Date of Receipt

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

Transaction ID: A2006-1941538

Amount of Each Receipt this Period

10.76

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: PAGE 276 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

ROBERT J WHITE

Mailing Address 909 STILLWATER COURT

City State Zip Code
 WESTON FL 33327

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 ▼

817.25

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762424

Amount of Each Receipt this Period

32.69

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

ROBERT J WHITE

Mailing Address 909 STILLWATER COURT

City State Zip Code
 WESTON FL 33327

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 ▼

849.94

Date of Receipt

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

Transaction ID: A2006-1941546

Amount of Each Receipt this Period

32.69

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

SAMUEL W WHITEMAN

Mailing Address 120 NE STONELEDGE PLACE

City State Zip Code
 LEESBURG VA 20176

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 ▼

644.08

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762733

Amount of Each Receipt this Period

29.58

SUBTOTAL of Receipts This Page (optional)

94.96

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: PAGE 277 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
SAMUEL W WHITEMAN

Mailing Address 120 NE STONELEDGE PLACE

City State Zip Code
LEESBURG VA 20176

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 ▼

673.66

Date of Receipt

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

Transaction ID: A2006-1941852

Amount of Each Receipt this Period

29.58

B. 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 ▼

429.95

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762408

Amount of Each Receipt this Period

16.35

C. 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 ▼

446.30

Date of Receipt

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

Transaction ID: A2006-1941530

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

62.28

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: PAGE 278 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) CYNTHIA R WHITLEY		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6	
Mailing Address 6722 NEW HAMPSHIRE TRAIL		Transaction ID: A2006-1762467	
City CRYSTAL LAKE	State IL	Zip Code 60012	Amount of Each Receipt this Period 35.80
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 ▼ 886.50		

B. Full Name (Last, First, Middle Initial) CYNTHIA R WHITLEY		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6	
Mailing Address 6722 NEW HAMPSHIRE TRAIL		Transaction ID: A2006-1941589	
City CRYSTAL LAKE	State IL	Zip Code 60012	Amount of Each Receipt this Period 35.80
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 ▼ 922.30		

C. Full Name (Last, First, Middle Initial) ROB WHOLF		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6	
Mailing Address 847 INTERLAKEN DRIVE		Transaction ID: A2006-1762507	
City LAKE ZURICH	State IL	Zip Code 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 ▼ 544.75		

SUBTOTAL of Receipts This Page (optional)

93.39

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 279 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

ROB WHOLF

Mailing Address 847 INTERLAKEN DRIVE

City

LAKE ZURICH

State

IL

Zip Code

60047

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 ▼

566.54

Date of Receipt

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

Transaction ID: A2006-1941628

Amount of Each Receipt this Period

21.79

B.

Full Name (Last, First, Middle Initial)

JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.10

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762550

Amount of Each Receipt this Period

30.33

C.

Full Name (Last, First, Middle Initial)

JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

783.43

Date of Receipt

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

Transaction ID: A2006-1941670

Amount of Each Receipt this Period

30.33

SUBTOTAL of Receipts This Page (optional)

82.45

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 280 / 301

(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 (Last, First, Middle Initial)

A. ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City State Zip Code
 KILDEER IL 60047

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 ▼

948.86

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762763

Amount of Each Receipt this Period

39.23

Full Name (Last, First, Middle Initial)

B. ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City State Zip Code
 KILDEER IL 60047

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 ▼

988.09

Date of Receipt

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

Transaction ID: A2006-1941882

Amount of Each Receipt this Period

39.23

Full Name (Last, First, Middle Initial)

C. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City State Zip Code
 CLARKSVILLE MD 21029

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 ▼

926.55

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762582

Amount of Each Receipt this Period

37.35

SUBTOTAL of Receipts This Page (optional)

115.81

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 281 / 301

(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 (Last, First, Middle Initial)

A. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City State Zip Code
 CLARKSVILLE MD 21029

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 ▼

963.90

Date of Receipt

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

Transaction ID: A2006-1941702

Amount of Each Receipt this Period

37.35

Full Name (Last, First, Middle Initial)

B. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City State Zip Code
 CHICAGO IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4760.76

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762684

Amount of Each Receipt this Period

192.69

Full Name (Last, First, Middle Initial)

C. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City State Zip Code
 CHICAGO IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4953.45

Date of Receipt

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

Transaction ID: A2006-1941804

Amount of Each Receipt this Period

192.69

SUBTOTAL of Receipts This Page (optional)

422.73

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 282 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KURT L WINTER
Mailing Address 1403 N. WALNUT

City State Zip Code
ARLINGTON HGHTS IL 60004

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 ▼

375.55

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762804

Amount of Each Receipt this Period

15.18

B. Full Name (Last, First, Middle Initial)
KURT L WINTER
Mailing Address 1403 N. WALNUT

City State Zip Code
ARLINGTON HGHTS IL 60004

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 ▼

390.73

Date of Receipt

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

Transaction ID: A2006-1941923

Amount of Each Receipt this Period

15.18

C. Full Name (Last, First, Middle Initial)
BRUCE A WOIKE
Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.85

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762656

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

50.24

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: PAGE 283 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BRUCE A WOIKE
Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.73

Date of Receipt

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

Transaction ID: A2006-1941776

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)
MATTHEW WOJTASZEK
Mailing Address 7 WELLESLEY COURT

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Operations M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.72

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762406

Amount of Each Receipt this Period

30.02

C. Full Name (Last, First, Middle Initial)
MATTHEW WOJTASZEK
Mailing Address 7 WELLESLEY COURT

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Operations M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.74

Date of Receipt

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

Transaction ID: A2006-1941528

Amount of Each Receipt this Period

30.02

SUBTOTAL of Receipts This Page (optional)

79.92

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 284 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RHONDA WOODARD
Mailing Address 2341 MARCY AVENUE

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRODUCT DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.25

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762754

Amount of Each Receipt this Period

34.21

B. Full Name (Last, First, Middle Initial)
RHONDA WOODARD
Mailing Address 2341 MARCY AVENUE

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRODUCT DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

882.46

Date of Receipt

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

Transaction ID: A2006-1941873

Amount of Each Receipt this Period

34.21

C. Full Name (Last, First, Middle Initial)
DAVID E WOOLWINE
Mailing Address 1608 W. ROSEHILL DR

City State Zip Code
CHICAGO IL 60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.15

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762455

Amount of Each Receipt this Period

13.98

SUBTOTAL of Receipts This Page (optional)

82.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 285 / 301

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID E WOOLWINE
Mailing Address 1608 W. ROSEHILL DR

City State Zip Code
CHICAGO IL 60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.13

Date of Receipt

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

Transaction ID: A2006-1941577

Amount of Each Receipt this Period

13.98

B. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR
Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 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 ▼

824.30

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762555

Amount of Each Receipt this Period

33.35

C. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR
Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 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 ▼

857.65

Date of Receipt

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

Transaction ID: A2006-1941675

Amount of Each Receipt this Period

33.35

SUBTOTAL of Receipts This Page (optional)

80.68

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 286 / 301

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
FLOYD M YAGER
Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1116.20

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762619

Amount of Each Receipt this Period

45.25

B. Full Name (Last, First, Middle Initial)
FLOYD M YAGER
Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1161.45

Date of Receipt

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

Transaction ID: A2006-1941739

Amount of Each Receipt this Period

45.25

C. Full Name (Last, First, Middle Initial)
LORI J YELVINGTON
Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1079.14

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762627

Amount of Each Receipt this Period

43.86

SUBTOTAL of Receipts This Page (optional)

134.36

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 287 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LORI J YELVINGTON
Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1123.00

Date of Receipt

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

Transaction ID: A2006-1941747

Amount of Each Receipt this Period

43.86

B. Full Name (Last, First, Middle Initial)
RICHARD P YOCIUS
Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762557

Amount of Each Receipt this Period

39.76

C. Full Name (Last, First, Middle Initial)
RICHARD P YOCIUS
Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1033.76

Date of Receipt

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

Transaction ID: A2006-1941677

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

123.88

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: PAGE 288 / 301

(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 (Last, First, Middle Initial)

A. JAMES E YOUNG

Mailing Address 1212 N. WELLS ST. APT. 1504

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 ▼

411.57

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762450

Amount of Each Receipt this Period

16.85

Full Name (Last, First, Middle Initial)

B. JAMES E YOUNG

Mailing Address 1212 N. WELLS ST. APT. 1504

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 ▼

428.42

Date of Receipt

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

Transaction ID: A2006-1941572

Amount of Each Receipt this Period

16.85

Full Name (Last, First, Middle Initial)

C. 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 ▼

431.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762587

Amount of Each Receipt this Period

17.39

SUBTOTAL of Receipts This Page (optional)

51.09

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 289 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 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 ▼

448.39

Date of Receipt

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

Transaction ID: A2006-1941707

Amount of Each Receipt this Period

17.39

B. 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 ▼

1558.94

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762700

Amount of Each Receipt this Period

62.87

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 ▼

1621.81

Date of Receipt

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

Transaction ID: A2006-1941820

Amount of Each Receipt this Period

62.87

SUBTOTAL of Receipts This Page (optional)

143.13

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 290 / 301

(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 (Last, First, Middle Initial)

A. ROBERT F ZEMBRASKI JR

Mailing Address 1113 W WRIGHTWOOD # 1E

City State Zip Code
 CHICAGO IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Consultant-M2600

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.95

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762367

Amount of Each Receipt this Period

14.94

Full Name (Last, First, Middle Initial)

B. ROBERT F ZEMBRASKI JR

Mailing Address 1113 W WRIGHTWOOD # 1E

City State Zip Code
 CHICAGO IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Consultant-M2600

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.89

Date of Receipt

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

Transaction ID: A2006-1941489

Amount of Each Receipt this Period

14.94

Full Name (Last, First, Middle Initial)

C. PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code
 VILLA PARK IL 60181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.45

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762672

Amount of Each Receipt this Period

18.22

SUBTOTAL of Receipts This Page (optional)

48.10

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 291 / 301

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) PAUL K ZIGTERMAN Mailing Address 236 SOUTH RIVERSIDE DRIVE City State Zip Code VILLA PARK IL 60181 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 470.67		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941792 Amount of Each Receipt this Period 18.22
B. Full Name (Last, First, Middle Initial) JAMES P ZILS Mailing Address 832 PADDOCK LANE City State Zip Code LIBERTYVILLE IL 60048 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 ▼ 898.42		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 6 Transaction ID: A2006-1762734 Amount of Each Receipt this Period 36.34
C. Full Name (Last, First, Middle Initial) JAMES P ZILS Mailing Address 832 PADDOCK LANE City State Zip Code LIBERTYVILLE IL 60048 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 ▼ 934.76		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 2 / 2 0 0 6 Transaction ID: A2006-1941853 Amount of Each Receipt this Period 36.34

SUBTOTAL of Receipts This Page (optional)

90.90

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 292 / 301

(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 (Last, First, Middle Initial)

A. JESSE W ZIMMERMAN

Mailing Address 333 WEST HUBBARD STREET #623

City State Zip Code
 CHICAGO IL 60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Product Operations Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.55

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762369

Amount of Each Receipt this Period

12.95

Full Name (Last, First, Middle Initial)

B. JESSE W ZIMMERMAN

Mailing Address 333 WEST HUBBARD STREET #623

City State Zip Code
 CHICAGO IL 60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Product Operations Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.50

Date of Receipt

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

Transaction ID: A2006-1941491

Amount of Each Receipt this Period

12.95

Full Name (Last, First, Middle Initial)

C. 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 ▼

853.50

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: A2006-1762691

Amount of Each Receipt this Period

34.50

SUBTOTAL of Receipts This Page (optional)

60.40

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 293 / 301

(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)
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 CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

888.00

Date of Receipt

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

Transaction ID: A2006-1941811

Amount of Each Receipt this Period

34.50

B. 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 CompanyOccupation
AVP HR People Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	6

Transaction ID: A2006-1762751

Amount of Each Receipt this Period

33.78

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 CompanyOccupation
AVP HR People Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.25

Date of Receipt

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

Transaction ID: A2006-1941870

Amount of Each Receipt this Period

33.78

SUBTOTAL of Receipts This Page (optional)

102.06

TOTAL This Period (last page this line number only)

27291.45

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

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

FOR LINE NUMBER: PAGE 294 / 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Friends of Mike Busch

Mailing Address P.O. Box 2241

City State Zip Code
Annapolis MD 21404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: A5779

Amount of Each Receipt this Period

2000.00

Orig. \$1,000.00 contribu-
tions were made on 11/13/03
and 11/01/04

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 295 / 301

<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

Mailing Address 346 West Carol Lane

City
ElmhurstState
ILZip Code
60062Purpose of Disbursement
Bank Service Charge

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: IL

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B156328

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	3		2	0	0	6

Amount of Each Disbursement this Period

181.86

Full Name (Last, First, Middle Initial)

B. Fifth Third Bank

Mailing Address 346 West Carol Lane

City
ElmhurstState
ILZip Code
60062Purpose of Disbursement
Bank Service Charge

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: IL

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B156330

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	3		2	0	0	6

Amount of Each Disbursement this Period

0.05

SUBTOTAL of Disbursements This Page (optional)

181.91

TOTAL This Period (last page this line number only)

181.91

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 296 / 301

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Karen Carter for US Congress

Mailing Address 2222 Canal Street

City State Zip Code
New Orleans LA 70119

Purpose of Disbursement
O-2006 U.S. House 2 LA

Candidate Name
Karen Carter

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
Runoff

State: LA District: 2

Transaction ID: B154889

Date of Disbursement

11 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JOE PAC

Mailing Address 426 C Street NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement
P-2008 U.S. House 07 NY

Candidate Name
Joseph Crowley

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 07

Transaction ID: B154892

Date of Disbursement

11 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mark Pryor for Senate Cmte.

Mailing Address 420 C Street NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement
G-2008 U.S. Senate AR

Candidate Name
Mark Pryor

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District:

Transaction ID: B154893

Date of Disbursement

11 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 297 / 301

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Melissa Bean for Congress

Mailing Address 233 Massachusetts Ave. NE 2nd Flr.

City Washington State DC Zip Code 20002

Purpose of Disbursement
O-2006 U.S. House 08 IL

Candidate Name
Melissa Bean

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: IL District: 08

Debt Ret General

Transaction ID: B155144

Date of Disbursement

12 / 05 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. New American Leadership Fund

Mailing Address PO Box 112

City Winnetka State IL Zip Code 60093

Purpose of Disbursement
O-2006 Federal PAC US

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: IL District:

Not Applicable

Transaction ID: B155145

Date of Disbursement

12 / 05 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Our Common Values PAC

Mailing Address 101 West Grand Avenue Suite 200

City Chicago State IL Zip Code 60610

Purpose of Disbursement
O-2006 Federal PAC IL

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: IL District:

Not Applicable

Transaction ID: B155146

Date of Disbursement

12 / 05 / 2006

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

7000.00

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 298 / 301

<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. Louisiana Legislative Black Caucus

Mailing Address 900 N. Third St. Basement Rm. 170

City State Zip Code
Baton Rouge LA 70804

Purpose of Disbursement
O-2006 State PAC LA

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: LA District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B155202

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. LA Legislative Women's Caucus

Mailing Address PO Box 44188

City State Zip Code
Baton Rouge LA 70804

Purpose of Disbursement
O-2006 State PAC LA

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: LA District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B155203

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LA House Democratic Campaign Committee

Mailing Address P.O. Box 4385

City State Zip Code
Baton Rouge LA 70821

Purpose of Disbursement
O-2006 State Party Cmte LA

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: LA District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B155204

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

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)

PAGE 299 / 301

<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. Louisiana Rep. Legislative Delegation

Mailing Address P.O. Box 44422

City State Zip Code
Baton Rouge LA 70804

Purpose of Disbursement
O-2006 State Party Cmte LA

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
State: LA District: Not Applicable

Transaction ID: B155205

Date of Disbursement

12 / 08 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. John Kennedy for State Treasurer

Mailing Address P.O. Box 80748

City State Zip Code
Baton Rouge LA 70898

Purpose of Disbursement
P-2007 State Treasurer LA

Candidate Name
John N Kennedy

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2007
☒ Primary ☐ General
☐ Other (specify) ▼
State: LA District:

Transaction ID: B155206

Date of Disbursement

12 / 08 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Governor Kathleen Blanco Campaign

Mailing Address P.O. Box 80722

City State Zip Code
Lafayette LA 70598

Purpose of Disbursement
P-2007 Governor LA

Candidate Name
Kathleen Blanco

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2007
☒ Primary ☐ General
☐ Other (specify) ▼
State: LA District:

Transaction ID: B155207

Date of Disbursement

12 / 08 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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 300 / 301

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

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

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Rep. Dan Morrish Campaign Fund

Mailing Address 119 West Nezpique

City
Jennings

State
LA

Zip Code
70546

Purpose of Disbursement
P-2007 State House 37 LA

Candidate Name
Blade Morrish

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2007
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 37

Transaction ID: B155208

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Rep. Dale Erdey Campaign Fund

Mailing Address P.O. Box 908

City
Livingston

State
LA

Zip Code
70754

Purpose of Disbursement
P-2007 State House 71 LA

Candidate Name
Dale Erdey

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2007
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 71

Transaction ID: B155209

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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

5500.00

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.