

**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

05

01

2010

through

05

31

2010

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

06

09

2010

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. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 181

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div>Y Y Y Y 2010</div>		37795.26
(b) Cash on Hand at Beginning of Reporting Period	32979.81	
(c) Total Receipts (from Line 19)	28655.07	141650.42
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	61634.88	179445.68
7. Total Disbursements (from Line 31)	15403.56	133214.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	46231.32	46231.32
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. 06/2004)

3 / 181

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	22392.05	62805.48
(ii) Unitemized	6262.86	74343.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)	28654.91	137149.22
(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)	28654.91	137149.22
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	4500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.16	1.20
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))	28655.07	141650.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28655.07	141650.42

DETAILED SUMMARY PAGE

of Disbursements

4 / 181

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	103.56	614.36	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	103.56	614.36	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	90500.00	
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.....	4300.00	42100.00	
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))..	15403.56	133214.36	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15403.56	133214.36	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 181

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)	28654.91	137149.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28654.91	137149.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	103.56	614.36
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	103.56	614.36

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

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

FOR LINE NUMBER: PAGE 6 / 181

(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)

REBECCA A ABEL

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

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 ▼

219.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199793

Amount of Each Receipt this Period

22.02

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

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199288

Amount of Each Receipt this Period

33.36

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

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199725

Amount of Each Receipt this Period

33.36

SUBTOTAL of Receipts This Page (optional)

88.74

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID :

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

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

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

FOR LINE NUMBER: PAGE 8 / 181

(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

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199343

Amount of Each Receipt this Period

34.66

B.

Full Name (Last, First, Middle Initial)

LORAL 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

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.76

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199780

Amount of Each Receipt this Period

34.66

C.

Full Name (Last, First, Middle Initial)

ERIKA SAHERN

Mailing Address 16 Sea Winds Lane East

City

Ponte Vedra Beach

State

FL

Zip Code

32082

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 ▼

251.33

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198977

Amount of Each Receipt this Period

28.41

SUBTOTAL of Receipts This Page (optional)

97.73

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 181

(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)

ERIKA S AHERN

Mailing Address 16 Sea Winds Lane East

City

Ponte Vedra Beach

State

FL

Zip Code

32082

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 ▼

279.74

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199415

Amount of Each Receipt this Period

28.41

B.

Full Name (Last, First, Middle Initial)

PATRICIA A AITKEN

Mailing Address 1245 CARIBOU LANE

City

HOFFMAN ESTATES

State

IL

Zip Code

60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP HR People Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199110

Amount of Each Receipt this Period

23.44

C.

Full Name (Last, First, Middle Initial)

PATRICIA A AITKEN

Mailing Address 1245 CARIBOU LANE

City

HOFFMAN ESTATES

State

IL

Zip Code

60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP HR People Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199547

Amount of Each Receipt this Period

23.44

SUBTOTAL of Receipts This Page (optional)

75.29

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 181

(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 L ALLEN

Mailing Address 4372 Duckhorn Drive

City

Moon Township

State

PA

Zip Code

15108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199014

Amount of Each Receipt this Period

31.71

B.

Full Name (Last, First, Middle Initial)

DAVID L ALLEN

Mailing Address 4372 Duckhorn Drive

City

Moon Township

State

PA

Zip Code

15108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.82

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199452

Amount of Each Receipt this Period

31.71

C.

Full Name (Last, First, Middle Initial)

AMY M ALLMON

Mailing Address 4499 Meyers Ct

City

Castle Rock

State

CO

Zip Code

80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199269

Amount of Each Receipt this Period

25.20

SUBTOTAL of Receipts This Page (optional)

88.62

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 11 / 181

(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)

AMY M ALLMON

Mailing Address 4499 Meyers Ct

City

Castle Rock

State

CO

Zip Code

80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.72

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199706

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City

GRAYS LAKE

State

IL

Zip Code

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 ▼

691.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198966

Amount of Each Receipt this Period

78.78

C.

Full Name (Last, First, Middle Initial)

JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City

GRAYS LAKE

State

IL

Zip Code

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 ▼

769.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199404

Amount of Each Receipt this Period

78.78

SUBTOTAL of Receipts This Page (optional)

182.76

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 181

(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 C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE, N

City

JACKSONVILLE

State

FL

Zip Code

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 ▼

296.38

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199056

Amount of Each Receipt this Period

33.22

B.

Full Name (Last, First, Middle Initial)

CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE, N

City

JACKSONVILLE

State

FL

Zip Code

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 ▼

329.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199493

Amount of Each Receipt this Period

33.22

C.

Full Name (Last, First, Middle Initial)

DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City

Scottsdale

State

AZ

Zip Code

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 ▼

207.32

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199406

Amount of Each Receipt this Period

21.54

SUBTOTAL of Receipts This Page (optional)

87.98

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 181

(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)

ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse, Unit 508

City

Chicago

State

IL

Zip Code

60626

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 ▼

253.54

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199259

Amount of Each Receipt this Period

28.54

B.

Full Name (Last, First, Middle Initial)

ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse, Unit 508

City

Chicago

State

IL

Zip Code

60626

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 ▼

282.08

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199696

Amount of Each Receipt this Period

28.54

C.

Full Name (Last, First, Middle Initial)

GREGORY P BALDWIN

Mailing Address 2 Saddle Ridge Ct.

City

Hawthorn Woods

State

IL

Zip Code

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 ▼

343.56

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199249

Amount of Each Receipt this Period

39.16

SUBTOTAL of Receipts This Page (optional)

96.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 181

(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 P BALDWIN

Mailing Address 2 Saddle Ridge Ct.

City

Hawthorn Woods

State

IL

Zip Code

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 ▼

382.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199686

Amount of Each Receipt this Period

39.16

B.

Full Name (Last, First, Middle Initial)

WILLIAM P BALLINGER

Mailing Address 25 Blue Heron Way

City

Skillman

State

NJ

Zip Code

08558

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 ▼

321.39

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199032

Amount of Each Receipt this Period

35.87

C.

Full Name (Last, First, Middle Initial)

WILLIAM P BALLINGER

Mailing Address 25 Blue Heron Way

City

Skillman

State

NJ

Zip Code

08558

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 ▼

357.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199469

Amount of Each Receipt this Period

35.87

SUBTOTAL of Receipts This Page (optional)

110.90

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 181

(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)

DARRYL L BALTIMORE

Mailing Address 259 MAY AVENUE

City

GLEN ELLYN

State

IL

Zip Code

60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Allstate Financial -

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.99

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199376

Amount of Each Receipt this Period

53.35

B.

Full Name (Last, First, Middle Initial)

DARRYL L BALTIMORE

Mailing Address 259 MAY AVENUE

City

GLEN ELLYN

State

IL

Zip Code

60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Allstate Financial -

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199813

Amount of Each Receipt this Period

53.35

C.

Full Name (Last, First, Middle Initial)

PHILLIP W BANET

Mailing Address 4589 JADE LANE

City

HOFFMAN ESTATES

State

IL

Zip Code

60192

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 ▼

315.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199084

Amount of Each Receipt this Period

35.46

SUBTOTAL of Receipts This Page (optional)

142.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 181

(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 W BANET

Mailing Address 4589 JADE LANE

City

HOFFMAN ESTATES

State

IL

Zip Code

60192

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 ▼

350.48

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199521

Amount of Each Receipt this Period

35.46

B.

Full Name (Last, First, Middle Initial)

ROBERT H BARGE III, III

Mailing Address 2222 LOCH WAY

City

EL DORADO HILLS

State

CA

Zip Code

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 ▼

648.82

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199355

Amount of Each Receipt this Period

72.82

C.

Full Name (Last, First, Middle Initial)

ROBERT H BARGE III, III

Mailing Address 2222 LOCH WAY

City

EL DORADO HILLS

State

CA

Zip Code

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 ▼

721.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199792

Amount of Each Receipt this Period

72.82

SUBTOTAL of Receipts This Page (optional)

181.10

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 181

(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 K BECKER

Mailing Address 108 Sloan Road

City

West Chester

State

PA

Zip Code

19382

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 ▼

221.82

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198988

Amount of Each Receipt this Period

25.38

B.

Full Name (Last, First, Middle Initial)

ROBERT K BECKER

Mailing Address 108 Sloan Road

City

West Chester

State

PA

Zip Code

19382

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 ▼

247.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199426

Amount of Each Receipt this Period

25.38

C.

Full Name (Last, First, Middle Initial)

DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City

Arlington Heights

State

IL

Zip Code

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 ▼

243.89

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199136

Amount of Each Receipt this Period

27.57

SUBTOTAL of Receipts This Page (optional)

78.33

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 18 / 181

(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 1402 N. Illinois Avenue

City

Arlington Heights

State

IL

Zip Code

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 ▼

271.46

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199573

Amount of Each Receipt this Period

27.57

B.

Full Name (Last, First, Middle Initial)

WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City

NAPERVILLE

State

IL

Zip Code

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 ▼

295.77

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199211

Amount of Each Receipt this Period

33.01

C.

Full Name (Last, First, Middle Initial)

WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City

NAPERVILLE

State

IL

Zip Code

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 ▼

328.78

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199648

Amount of Each Receipt this Period

33.01

SUBTOTAL of Receipts This Page (optional)

93.59

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 181

(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
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199005

Amount of Each Receipt this Period

40.40

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
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199443

Amount of Each Receipt this Period

40.40

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 Process Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199505

Amount of Each Receipt this Period

20.97

SUBTOTAL of Receipts This Page (optional)

101.77

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 181

(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 A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City

PONTE VEDRA BEA

State

FL

Zip Code

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 ▼

360.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199290

Amount of Each Receipt this Period

40.54

B.

Full Name (Last, First, Middle Initial)

DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City

PONTE VEDRA BEA

State

FL

Zip Code

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 ▼

400.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199727

Amount of Each Receipt this Period

40.54

C.

Full Name (Last, First, Middle Initial)

ROBERT L BLOCK

Mailing Address 398 Brookmont Lane

City

North Barrington

State

IL

Zip Code

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 ▼

572.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199279

Amount of Each Receipt this Period

64.20

SUBTOTAL of Receipts This Page (optional)

145.28

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 181

(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

North Barrington

State

IL

Zip Code

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 ▼

637.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199716

Amount of Each Receipt this Period

64.20

B.

Full Name (Last, First, Middle Initial)

DOUGLAS L BORG

Mailing Address 2160 Red Setter Road

City

Rocklin

State

CA

Zip Code

95765

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.47

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199353

Amount of Each Receipt this Period

32.83

C.

Full Name (Last, First, Middle Initial)

DOUGLAS L BORG

Mailing Address 2160 Red Setter Road

City

Rocklin

State

CA

Zip Code

95765

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199790

Amount of Each Receipt this Period

32.83

SUBTOTAL of Receipts This Page (optional)

129.86

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 181

(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 B BOYLE

Mailing Address 1063 CHERRY STREET

City

WINNETKA

State

IL

Zip Code

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 ▼

703.31

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199035

Amount of Each Receipt this Period

78.83

B.

Full Name (Last, First, Middle Initial)

MICHAEL B BOYLE

Mailing Address 1063 CHERRY STREET

City

WINNETKA

State

IL

Zip Code

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 ▼

782.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199472

Amount of Each Receipt this Period

78.83

C.

Full Name (Last, First, Middle Initial)

LONDON B BRADLEY

Mailing Address 2411 Grey Eagle Bay

City

woodbury

State

MN

Zip Code

55129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.25

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199324

Amount of Each Receipt this Period

31.93

SUBTOTAL of Receipts This Page (optional)

189.59

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 181

(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 2411 Grey Eagle Bay

City State Zip Code
woodbury MN 55129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199761

Amount of Each Receipt this Period

31.93

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
AVP Encompass Field Distr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.38

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199731

Amount of Each Receipt this Period

22.31

C.

Full Name (Last, First, Middle Initial)
JEFFREY P BRASK

Mailing Address 21285 S. BOSCHOME CIRCLE

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199597

Amount of Each Receipt this Period

20.48

SUBTOTAL of Receipts This Page (optional)

74.72

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 181

(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)
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
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199146

Amount of Each Receipt this Period

44.94

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
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199583

Amount of Each Receipt this Period

44.94

C.

Full Name (Last, First, Middle Initial)
LINDA K BROBECK

Mailing Address 399 Summit Dr.

City State Zip Code
Emerald Hills CA 94062

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 ▼

203.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199552

Amount of Each Receipt this Period

20.68

SUBTOTAL of Receipts This Page (optional)

110.56

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 181

(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)

LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City

FRANKLIN

State

TN

Zip Code

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 ▼

329.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	0

Transaction ID: A2010-1199048

Amount of Each Receipt this Period

36.96

B.

Full Name (Last, First, Middle Initial)

LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City

FRANKLIN

State

TN

Zip Code

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 ▼

366.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	1	0

Transaction ID: A2010-1199485

Amount of Each Receipt this Period

36.96

C.

Full Name (Last, First, Middle Initial)

BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City

CHICAGO

State

IL

Zip Code

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 ▼

201.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	1	0

Transaction ID: A2010-1199531

Amount of Each Receipt this Period

20.38

SUBTOTAL of Receipts This Page (optional)

94.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 26 / 181

(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

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1687.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199055

Amount of Each Receipt this Period

188.46

B.

Full Name (Last, First, Middle Initial)

CATHERINE S BRUNE

Mailing Address 190 SAVANNA CT

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 & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199492

Amount of Each Receipt this Period

188.46

C.

Full Name (Last, First, Middle Initial)

ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

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:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199142

Amount of Each Receipt this Period

37.02

SUBTOTAL of Receipts This Page (optional)

413.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 181

(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)

ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

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:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.32

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199579

Amount of Each Receipt this Period

37.02

B.

Full Name (Last, First, Middle Initial)

DAVID N BUGGS

Mailing Address 12234 85TH AVE

City

PLEASANT PR

State

WI

Zip Code

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 ▼

294.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199280

Amount of Each Receipt this Period

33.10

C.

Full Name (Last, First, Middle Initial)

DAVID N BUGGS

Mailing Address 12234 85TH AVE

City

PLEASANT PR

State

WI

Zip Code

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 ▼

327.16

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199717

Amount of Each Receipt this Period

33.10

SUBTOTAL of Receipts This Page (optional)

103.22

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 181

(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)

JEFFREY E BURKE

Mailing Address 601 North Pines Trail

City

Parker

State

CO

Zip Code

80138

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 ▼

387.77

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199382

Amount of Each Receipt this Period

43.25

B.

Full Name (Last, First, Middle Initial)

JEFFREY E BURKE

Mailing Address 601 North Pines Trail

City

Parker

State

CO

Zip Code

80138

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 ▼

431.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199819

Amount of Each Receipt this Period

43.25

C.

Full Name (Last, First, Middle Initial)

GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City

VERNON HILLS

State

IL

Zip Code

60061

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 ▼

220.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199449

Amount of Each Receipt this Period

22.23

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 181

(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

SPRING GROVE

State

IL

Zip Code

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 ▼

811.94

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198956

Amount of Each Receipt this Period

90.62

B.

Full Name (Last, First, Middle Initial)

CECILE A BUTLER

Mailing Address 9309 ELIZABETH LANE

City

SPRING GROVE

State

IL

Zip Code

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 ▼

902.56

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199394

Amount of Each Receipt this Period

90.62

C.

Full Name (Last, First, Middle Initial)

ALICE M BYRNE

Mailing Address 4121 109TH STREET

City

PLEASANT PRAIRI

State

WI

Zip Code

53158

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 ▼

724.83

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199274

Amount of Each Receipt this Period

81.35

SUBTOTAL of Receipts This Page (optional)

262.59

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 181

(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)

ALICE M BYRNE

Mailing Address 4121 109TH STREET

City

PLEASANT PRAIRI

State

WI

Zip Code

53158

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 ▼

806.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199711

Amount of Each Receipt this Period

81.35

B.

Full Name (Last, First, Middle Initial)

IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City

LAKE FOREST

State

IL

Zip Code

60045

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 ▼

223.74

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199287

Amount of Each Receipt this Period

25.26

C.

Full Name (Last, First, Middle Initial)

IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City

LAKE FOREST

State

IL

Zip Code

60045

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 ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199724

Amount of Each Receipt this Period

25.26

SUBTOTAL of Receipts This Page (optional)

131.87

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 31 / 181

(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)
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 Company

Occupation
Communication Senior Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199657

Amount of Each Receipt this Period

21.47

B.

Full Name (Last, First, Middle Initial)
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 Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.39

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199201

Amount of Each Receipt this Period

42.67

C.

Full Name (Last, First, Middle Initial)
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 Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199638

Amount of Each Receipt this Period

42.67

SUBTOTAL of Receipts This Page (optional)

106.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 181

(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

LINDENHURST

State

IL

Zip Code

60046

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 ▼

231.67

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199229

Amount of Each Receipt this Period

26.19

B.

Full Name (Last, First, Middle Initial)

EDWARD T CLARK

Mailing Address 2907 GLENARYE DR

City

LINDENHURST

State

IL

Zip Code

60046

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 ▼

257.86

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199666

Amount of Each Receipt this Period

26.19

C.

Full Name (Last, First, Middle Initial)

CHRISTOPHER W CLAY

Mailing Address 8875 SILVERBERRY AVENUE

City

ELK GROVE

State

CA

Zip Code

95624

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 ▼

262.09

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199379

Amount of Each Receipt this Period

29.81

SUBTOTAL of Receipts This Page (optional)

82.19

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 33 / 181

(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 W CLAY

Mailing Address 8875 SILVERBERRY AVENUE

City State Zip Code
 ELK GROVE CA 95624

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 ▼

291.90

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199816

Amount of Each Receipt this Period

29.81

B.

Full Name (Last, First, Middle Initial)

MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
 WESTERN SPRINGS IL 60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.39

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199086

Amount of Each Receipt this Period

36.92

C.

Full Name (Last, First, Middle Initial)

MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
 WESTERN SPRINGS IL 60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.31

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199523

Amount of Each Receipt this Period

36.92

SUBTOTAL of Receipts This Page (optional)

103.65

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 34 / 181

(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
Regional Marketing Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199227

Amount of Each Receipt this Period

30.38

B.

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
Regional Marketing Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199664

Amount of Each Receipt this Period

30.38

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 ▼

308.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199186

Amount of Each Receipt this Period

34.69

SUBTOTAL of Receipts This Page (optional)

95.45

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 35 / 181

(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)

LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City

WINNETKA

State

IL

Zip Code

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 ▼

343.62

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199623

Amount of Each Receipt this Period

34.69

B.

Full Name (Last, First, Middle Initial)

PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199626

Amount of Each Receipt this Period

21.97

C.

Full Name (Last, First, Middle Initial)

EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City

GURNEE

State

IL

Zip Code

60031

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 ▼

396.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199134

Amount of Each Receipt this Period

44.71

SUBTOTAL of Receipts This Page (optional)

101.37

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 36 / 181

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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)
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
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199571

Amount of Each Receipt this Period

44.71

B.

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 ▼

285.29

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199191

Amount of Each Receipt this Period

32.25

C.

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 ▼

317.54

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199628

Amount of Each Receipt this Period

32.25

SUBTOTAL of Receipts This Page (optional)

109.21

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 37 / 181

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City

ARLINGTON HGTS.

State

IL

Zip Code

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 ▼

694.37

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199092

Amount of Each Receipt this Period

78.33

B.

Full Name (Last, First, Middle Initial)

WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City

ARLINGTON HGTS.

State

IL

Zip Code

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 ▼

772.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199529

Amount of Each Receipt this Period

78.33

C.

Full Name (Last, First, Middle Initial)

RICHARD C CRIST JR, Jr.

Mailing Address 905 Chalet Court

City

Colleyville

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President -Corp Ethn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199017

Amount of Each Receipt this Period

72.26

SUBTOTAL of Receipts This Page (optional)

228.92

TOTAL This Period (last page this line number only)

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

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FOR LINE NUMBER: PAGE 38 / 181

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

RICHARD C CRIST JR, Jr.

Mailing Address 905 Chalet Court

City

Colleyville

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President -Corp Ethn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199455

Amount of Each Receipt this Period

72.26

B.

Full Name (Last, First, Middle Initial)

WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City

BARRINGTON

State

IL

Zip Code

60010

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 ▼

413.62

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199004

Amount of Each Receipt this Period

47.14

C.

Full Name (Last, First, Middle Initial)

WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City

BARRINGTON

State

IL

Zip Code

60010

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 ▼

460.76

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199442

Amount of Each Receipt this Period

47.14

SUBTOTAL of Receipts This Page (optional)

166.54

TOTAL This Period (last page this line number only)

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

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FOR LINE NUMBER: PAGE 39 / 181

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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 ▼

331.97

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199044

Amount of Each Receipt this Period

37.05

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 ▼

369.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199481

Amount of Each Receipt this Period

37.05

C.

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

Mailing Address 1954 Oakwood 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
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199135

Amount of Each Receipt this Period

34.71

SUBTOTAL of Receipts This Page (optional)

108.81

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 40 / 181

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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)
RANDAL S DECOURSEY

Mailing Address 1954 Oakwood 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
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199572

Amount of Each Receipt this Period

34.71

B.

Full Name (Last, First, Middle Initial)
STEVEN J DEGNAN-SCHMIDT

Mailing Address 1320 MULBERRY LN.

City State Zip Code
CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199074

Amount of Each Receipt this Period

38.74

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 ▼

382.92

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199511

Amount of Each Receipt this Period

38.74

SUBTOTAL of Receipts This Page (optional)

112.19

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 41 / 181

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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)

JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City

ELMHURST

State

IL

Zip Code

60126

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 ▼

491.31

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199245

Amount of Each Receipt this Period

54.59

B.

Full Name (Last, First, Middle Initial)

JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City

ELMHURST

State

IL

Zip Code

60126

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 ▼

545.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199682

Amount of Each Receipt this Period

54.59

C.

Full Name (Last, First, Middle Initial)

DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City

BARRINGTON

State

IL

Zip Code

60010

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199655

Amount of Each Receipt this Period

21.08

SUBTOTAL of Receipts This Page (optional)

130.26

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 42 / 181

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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)

LORI A DESCH

Mailing Address 12923 Freemont Peak Lane

City

Humble

State

TX

Zip Code

77346

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 ▼

377.13

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199066

Amount of Each Receipt this Period

42.61

B.

Full Name (Last, First, Middle Initial)

LORI A DESCH

Mailing Address 12923 Freemont Peak Lane

City

Humble

State

TX

Zip Code

77346

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 ▼

419.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199503

Amount of Each Receipt this Period

42.61

C.

Full Name (Last, First, Middle Initial)

SARAH R DONAHUE

Mailing Address 4147 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

AVP-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.18

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199219

Amount of Each Receipt this Period

58.50

SUBTOTAL of Receipts This Page (optional)

143.72

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 43 / 181

(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)
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-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199656

Amount of Each Receipt this Period

58.50

B.

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
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199775

Amount of Each Receipt this Period

20.28

C.

Full Name (Last, First, Middle Initial)
DANIEL C DRESSSEL

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 ▼

200.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199458

Amount of Each Receipt this Period

20.18

SUBTOTAL of Receipts This Page (optional)

98.96

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 44 / 181

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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)

PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

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 ▼

250.56

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199111

Amount of Each Receipt this Period

28.32

B.

Full Name (Last, First, Middle Initial)

PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

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 ▼

278.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199548

Amount of Each Receipt this Period

28.32

C.

Full Name (Last, First, Middle Initial)

DONALD L DUFF

Mailing Address 127 E. STREAMWOOD BLVD.

City

STREAMWOOD

State

IL

Zip Code

60107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Line of Bus Sr Mgr-Small

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.27

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199107

Amount of Each Receipt this Period

23.35

SUBTOTAL of Receipts This Page (optional)

79.99

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 45 / 181

(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)
DONALD L DUFF

Mailing Address 127 E. STREAMWOOD BLVD.

City State Zip Code
STREAMWOOD IL 60107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Line of Bus Sr Mgr-Small

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.62

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199544

Amount of Each Receipt this Period

23.35

B.

Full Name (Last, First, Middle Initial)
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 ▼

290.39

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199329

Amount of Each Receipt this Period

32.55

C.

Full Name (Last, First, Middle Initial)
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 ▼

322.94

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199766

Amount of Each Receipt this Period

32.55

SUBTOTAL of Receipts This Page (optional)

88.45

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 46 / 181

(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 DUNN

Mailing Address 18202 HARNISH RD.

City

ROSCOE

State

IL

Zip Code

61073

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 ▼

230.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199199

Amount of Each Receipt this Period

25.80

B.

Full Name (Last, First, Middle Initial)

MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City

ROSCOE

State

IL

Zip Code

61073

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 ▼

256.48

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199636

Amount of Each Receipt this Period

25.80

C.

Full Name (Last, First, Middle Initial)

LAURA DUNNE

Mailing Address 1810 BALMORAL AVE

City

GLENVIEW

State

IL

Zip Code

60025

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 ▼

209.82

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199204

Amount of Each Receipt this Period

23.42

SUBTOTAL of Receipts This Page (optional)

75.02

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 47 / 181

(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

GLENVIEW

State

IL

Zip Code

60025

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 ▼

233.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199641

Amount of Each Receipt this Period

23.42

B.

Full Name (Last, First, Middle Initial)

DANIEL P DURBIN

Mailing Address 1311 SOUTH WALNUT 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

Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.87

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199225

Amount of Each Receipt this Period

30.27

C.

Full Name (Last, First, Middle Initial)

DANIEL P DURBIN

Mailing Address 1311 SOUTH WALNUT 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

Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199662

Amount of Each Receipt this Period

30.27

SUBTOTAL of Receipts This Page (optional)

83.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 48 / 181

(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 S EASLEY

Mailing Address 1327 N Illinois Avenue

City State Zip Code
Arlington Heights IL 60004

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 ▼

307.07

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199117

Amount of Each Receipt this Period

34.27

B.

Full Name (Last, First, Middle Initial)
MATTHEW S EASLEY

Mailing Address 1327 N Illinois Avenue

City State Zip Code
Arlington Heights IL 60004

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 ▼

341.34

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199554

Amount of Each Receipt this Period

34.27

C.

Full Name (Last, First, Middle Initial)
JAMES C EASON

Mailing Address 3077 EAST LAKE RD

City State Zip Code
MCDONOUGH GA 30252

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 ▼

256.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199060

Amount of Each Receipt this Period

28.90

SUBTOTAL of Receipts This Page (optional)

97.44

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 181

(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)

JAMES C EASON

Mailing Address 3077 EAST LAKE RD

City

MCDONOUGH

State

GA

Zip Code

30252

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 ▼

285.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199497

Amount of Each Receipt this Period

28.90

B.

Full Name (Last, First, Middle Initial)

SHEILA A ECKHOFF

Mailing Address 211 N ERIE ST

City

WHEATON

State

IL

Zip Code

60187

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 ▼

214.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199540

Amount of Each Receipt this Period

22.37

C.

Full Name (Last, First, Middle Initial)

KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City

CHICAGO

State

IL

Zip Code

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 ▼

344.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199233

Amount of Each Receipt this Period

38.64

SUBTOTAL of Receipts This Page (optional)

89.91

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 50 / 181

(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)

KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City

CHICAGO

State

IL

Zip Code

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 ▼

383.36

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199670

Amount of Each Receipt this Period

38.64

B.

Full Name (Last, First, Middle Initial)

MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City

INVERNESS

State

IL

Zip Code

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 ▼

483.75

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198969

Amount of Each Receipt this Period

53.75

C.

Full Name (Last, First, Middle Initial)

MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City

INVERNESS

State

IL

Zip Code

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 ▼

537.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199407

Amount of Each Receipt this Period

53.75

SUBTOTAL of Receipts This Page (optional)

146.14

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 51 / 181

(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 B ESPINOZA

Mailing Address 673 HASTINGS ROAD

City

WHEELING

State

IL

Zip Code

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 ▼

295.95

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199154

Amount of Each Receipt this Period

33.03

B.

Full Name (Last, First, Middle Initial)

RICHARD B ESPINOZA

Mailing Address 673 HASTINGS ROAD

City

WHEELING

State

IL

Zip Code

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 ▼

328.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199591

Amount of Each Receipt this Period

33.03

C.

Full Name (Last, First, Middle Initial)

THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

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 ▼

396.07

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199002

Amount of Each Receipt this Period

44.35

SUBTOTAL of Receipts This Page (optional)

110.41

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 52 / 181

(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)

THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

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 ▼

440.42

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199440

Amount of Each Receipt this Period

44.35

B.

Full Name (Last, First, Middle Initial)

KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City

KILDEER

State

IL

Zip Code

60049

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 ▼

354.72

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199286

Amount of Each Receipt this Period

39.76

C.

Full Name (Last, First, Middle Initial)

KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City

KILDEER

State

IL

Zip Code

60049

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 ▼

394.48

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199723

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

123.87

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 53 / 181

(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)

GORDON S FALKNOR

Mailing Address 703 E CHERRY LN

City

ARLINGTON HTS

State

IL

Zip Code

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 ▼

443.34

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199150

Amount of Each Receipt this Period

49.26

B.

Full Name (Last, First, Middle Initial)

GORDON S FALKNOR

Mailing Address 703 E CHERRY LN

City

ARLINGTON HTS

State

IL

Zip Code

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 ▼

492.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199587

Amount of Each Receipt this Period

49.26

C.

Full Name (Last, First, Middle Initial)

CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City

GLENVIEW

State

IL

Zip Code

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 ▼

247.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199263

Amount of Each Receipt this Period

27.76

SUBTOTAL of Receipts This Page (optional)

126.28

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 54 / 181

(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 ▼

274.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199700

Amount of Each Receipt this Period

27.76

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 ▼

232.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199009

Amount of Each Receipt this Period

26.03

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 ▼

258.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199447

Amount of Each Receipt this Period

26.03

SUBTOTAL of Receipts This Page (optional)

79.82

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 55 / 181

(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)

LISA J FLANARY

Mailing Address 1007 Harris Road

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Distribution Channel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.57

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199271

Amount of Each Receipt this Period

34.53

B.

Full Name (Last, First, Middle Initial)

LISA J FLANARY

Mailing Address 1007 Harris Road

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Distribution Channel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.10

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199708

Amount of Each Receipt this Period

34.53

C.

Full Name (Last, First, Middle Initial)

AMY C FLOYD

Mailing Address 1025 BONITA DRIVE

City

PARK RIDGE

State

IL

Zip Code

60068

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 ▼

200.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199501

Amount of Each Receipt this Period

20.18

SUBTOTAL of Receipts This Page (optional)

89.24

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 56 / 181

(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)

KELLY F FOGARTY

Mailing Address 613 REX

City

ELMHURST

State

IL

Zip Code

60126

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 ▼

363.67

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199145

Amount of Each Receipt this Period

41.11

B.

Full Name (Last, First, Middle Initial)

KELLY F FOGARTY

Mailing Address 613 REX

City

ELMHURST

State

IL

Zip Code

60126

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 ▼

404.78

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199582

Amount of Each Receipt this Period

41.11

C.

Full Name (Last, First, Middle Initial)

ANGELA FUSCO

Mailing Address 22255 MASHIE CT

City

IVANHOE

State

IL

Zip Code

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 ▼

309.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199019

Amount of Each Receipt this Period

35.28

SUBTOTAL of Receipts This Page (optional)

117.50

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 / 181

(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)

ANGELA FUSCO

Mailing Address 22255 MASHIE CT

City

IVANHOE

State

IL

Zip Code

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 ▼

344.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199457

Amount of Each Receipt this Period

35.28

B.

Full Name (Last, First, Middle Initial)

VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City

DIX HILLS

State

NY

Zip Code

11746

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 ▼

238.31

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198964

Amount of Each Receipt this Period

26.87

C.

Full Name (Last, First, Middle Initial)

VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City

DIX HILLS

State

NY

Zip Code

11746

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 ▼

265.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199402

Amount of Each Receipt this Period

26.87

SUBTOTAL of Receipts This Page (optional)

89.02

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 58 / 181

(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

HOFFMAN ESTATES

State

IL

Zip Code

60169

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 ▼

285.84

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199316

Amount of Each Receipt this Period

31.76

B.

Full Name (Last, First, Middle Initial)

BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City

HOFFMAN ESTATES

State

IL

Zip Code

60169

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 ▼

317.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199753

Amount of Each Receipt this Period

31.76

C.

Full Name (Last, First, Middle Initial)

JOAN GILMORE

Mailing Address 656 S BUCKINGHAM CT

City

LAKE FOREST

State

IL

Zip Code

60045

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 ▼

365.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198970

Amount of Each Receipt this Period

41.36

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 181

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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)

JOAN GILMORE

Mailing Address 656 S BUCKINGHAM CT

City

LAKE FOREST

State

IL

Zip Code

60045

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 ▼

407.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199408

Amount of Each Receipt this Period

41.36

B.

Full Name (Last, First, Middle Initial)

BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City

HAWTHORN WOODS

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 ▼

203.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199558

Amount of Each Receipt this Period

20.68

C.

Full Name (Last, First, Middle Initial)

ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City

ARLINGTON HTS

State

IL

Zip Code

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 ▼

303.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199359

Amount of Each Receipt this Period

33.95

SUBTOTAL of Receipts This Page (optional)

95.99

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 60 / 181

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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)

ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City

ARLINGTON HTS

State

IL

Zip Code

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 ▼

337.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199796

Amount of Each Receipt this Period

33.95

B.

Full Name (Last, First, Middle Initial)

GEORGE F GRAWE

Mailing Address 18799 GUNN HIGHWAY

City

ODESSA

State

FL

Zip Code

33556

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 ▼

215.34

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199500

Amount of Each Receipt this Period

21.77

C.

Full Name (Last, First, Middle Initial)

PAMELA P GRAY

Mailing Address 50 E. BELLEVUE PL. #2402

City

CHICAGO

State

IL

Zip Code

60611

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 ▼

248.13

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199296

Amount of Each Receipt this Period

27.93

SUBTOTAL of Receipts This Page (optional)

83.65

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 / 181

(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 P GRAY

Mailing Address 50 E. BELLEVUE PL. #2402

City

CHICAGO

State

IL

Zip Code

60611

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 ▼

276.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199733

Amount of Each Receipt this Period

27.93

B.

Full Name (Last, First, Middle Initial)

JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP & Chief Investment Of

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.69

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199081

Amount of Each Receipt this Period

58.85

C.

Full Name (Last, First, Middle Initial)

JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP & Chief Investment Of

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.54

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199518

Amount of Each Receipt this Period

58.85

SUBTOTAL of Receipts This Page (optional)

145.63

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 62 / 181

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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)

ANN M GROSS

Mailing Address 91 STABLE WAY

City

LINDENHURST

State

IL

Zip Code

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 ▼

226.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198980

Amount of Each Receipt this Period

25.40

B.

Full Name (Last, First, Middle Initial)

ANN M GROSS

Mailing Address 91 STABLE WAY

City

LINDENHURST

State

IL

Zip Code

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 ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199418

Amount of Each Receipt this Period

25.40

C.

Full Name (Last, First, Middle Initial)

GREGORY J GUIDOS

Mailing Address 417 Adams Avenue

City

Glencoe

State

IL

Zip Code

60022

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 ▼

235.42

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199261

Amount of Each Receipt this Period

26.50

SUBTOTAL of Receipts This Page (optional)

77.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 63 / 181

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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)
GREGORY J GUIDOS

Mailing Address 417 Adams Avenue

City State Zip Code
Glencoe IL 60022

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 ▼

261.92

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199698

Amount of Each Receipt this Period

26.50

B.

Full Name (Last, First, Middle Initial)
JENNIFER M HAGER

Mailing Address 2312 HARTREY AVENUE

City State Zip Code
EVANSTON IL 60201

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1182621

Amount of Each Receipt this Period

225.00

C.

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
Line of Busn Dir Auto-Sma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.59

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199360

Amount of Each Receipt this Period

26.91

SUBTOTAL of Receipts This Page (optional)

278.41

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 64 / 181

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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 F HAIR

Mailing Address 17 NORTH TRAIL

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Line of Busn Dir Auto-Sma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199797

Amount of Each Receipt this Period

26.91

B.

Full Name (Last, First, Middle Initial)

RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City

GRAYSLAKE

State

IL

Zip Code

60030

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 ▼

322.09

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199325

Amount of Each Receipt this Period

36.41

C.

Full Name (Last, First, Middle Initial)

RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City

GRAYSLAKE

State

IL

Zip Code

60030

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 ▼

358.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199762

Amount of Each Receipt this Period

36.41

SUBTOTAL of Receipts This Page (optional)

99.73

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 181

(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	State	Zip Code
ROSELLE	IL	60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP AF Operations & Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199075

Amount of Each Receipt this Period

25.82

B.Full Name (Last, First, Middle Initial)
KEITH A HAUSCHILDT

Mailing Address 636 ROSEDALE AVE

City	State	Zip Code
ROSELLE	IL	60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP AF Operations & Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199512

Amount of Each Receipt this Period

25.82

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

Mailing Address 29030 N Spoon Court

City	State	Zip Code
Ivanhoe	IL	60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199073

Amount of Each Receipt this Period

70.42

SUBTOTAL of Receipts This Page (optional)

122.06

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 66 / 181

(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 HEBEL

Mailing Address 29030 N Spoon Court

City State Zip Code
Ivanhoe IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199510

Amount of Each Receipt this Period

70.42

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 Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.51

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199096

Amount of Each Receipt this Period

25.39

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 Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199533

Amount of Each Receipt this Period

25.39

SUBTOTAL of Receipts This Page (optional)

121.20

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 67 / 181

(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

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Consultant Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.34

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199289

Amount of Each Receipt this Period

33.70

B.

Full Name (Last, First, Middle Initial)

ROBERT L HERRING

Mailing Address 4337 SPRUCE BOUGH DR

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Consultant Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199726

Amount of Each Receipt this Period

33.70

C.

Full Name (Last, First, Middle Initial)

WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.39

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199042

Amount of Each Receipt this Period

103.27

SUBTOTAL of Receipts This Page (optional)

170.67

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 68 / 181

(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 G HILL

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.66

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199479

Amount of Each Receipt this Period

103.27

B.

Full Name (Last, First, Middle Initial)

PAULA M HODGES

Mailing Address 7310 S 34TH CT

City

LINCOLN

State

NE

Zip Code

68516

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 ▼

263.72

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199335

Amount of Each Receipt this Period

29.56

C.

Full Name (Last, First, Middle Initial)

PAULA M HODGES

Mailing Address 7310 S 34TH CT

City

LINCOLN

State

NE

Zip Code

68516

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 ▼

293.28

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199772

Amount of Each Receipt this Period

29.56

SUBTOTAL of Receipts This Page (optional)

162.39

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 181

(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)

LINDA M HONOUR

Mailing Address 1066 Griffith 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

VP Investment Operations

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

411.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199371

Amount of Each Receipt this Period

46.14

B.

Full Name (Last, First, Middle Initial)

LINDA M HONOUR

Mailing Address 1066 Griffith 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

VP Investment Operations

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

457.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199808

Amount of Each Receipt this Period

46.14

C.

Full Name (Last, First, Middle Initial)

MERRILD A HOOVER

Mailing Address 49 DORAL STREET

City

HURRICANE

State

WV

Zip Code

25526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Sales Leader

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

216.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199047

Amount of Each Receipt this Period

24.31

SUBTOTAL of Receipts This Page (optional)

116.59

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 70 / 181

(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 Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199484

Amount of Each Receipt this Period

24.31

B.

Full Name (Last, First, Middle Initial)
F M HORD

Mailing Address 1101 S. State Street 1002

City State Zip Code
Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.63

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199089

Amount of Each Receipt this Period

32.31

C.

Full Name (Last, First, Middle Initial)
F M HORD

Mailing Address 1101 S. State Street 1002

City State Zip Code
Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.94

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199526

Amount of Each Receipt this Period

32.31

SUBTOTAL of Receipts This Page (optional)

88.93

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 71 / 181

(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

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.21

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199182

Amount of Each Receipt this Period

49.65

B.

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

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.86

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199619

Amount of Each Receipt this Period

49.65

C.

Full Name (Last, First, Middle Initial)

LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City

CARY

State

IL

Zip Code

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 ▼

267.83

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199137

Amount of Each Receipt this Period

30.15

SUBTOTAL of Receipts This Page (optional)

129.45

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 72 / 181

(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)
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 ▼

297.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199574

Amount of Each Receipt this Period

30.15

B.

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

Mailing Address 3602 FRANKLIN CT.

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.72

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199122

Amount of Each Receipt this Period

81.08

C.

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

Mailing Address 3602 FRANKLIN CT.

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199559

Amount of Each Receipt this Period

81.08

SUBTOTAL of Receipts This Page (optional)

192.31

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 73 / 181

(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)

BOB A JACKSON

Mailing Address 226 Maison Court

City

Altamonte Springs

State

FL

Zip Code

32714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199769

Amount of Each Receipt this Period

22.04

B.

Full Name (Last, First, Middle Initial)

JAMES C JAMIESON

Mailing Address 25 BRUCE CIRCLE NORTH

City

HAWTHORN WOODS

State

IL

Zip Code

60047

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 ▼

306.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199113

Amount of Each Receipt this Period

34.51

C.

Full Name (Last, First, Middle Initial)

JAMES C JAMIESON

Mailing Address 25 BRUCE CIRCLE NORTH

City

HAWTHORN WOODS

State

IL

Zip Code

60047

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 ▼

341.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199550

Amount of Each Receipt this Period

34.51

SUBTOTAL of Receipts This Page (optional)

91.06

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 181

(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

HUNTINGTON STA

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199416

Amount of Each Receipt this Period

20.92

B.

Full Name (Last, First, Middle Initial)

DAVID E KENNEY

Mailing Address 622 SEDGWICK DR.

City

LIBERTYVILLE

State

IL

Zip Code

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 ▼

357.75

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199209

Amount of Each Receipt this Period

39.75

C.

Full Name (Last, First, Middle Initial)

DAVID E KENNEY

Mailing Address 622 SEDGWICK DR.

City

LIBERTYVILLE

State

IL

Zip Code

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 ▼

397.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199646

Amount of Each Receipt this Period

39.75

SUBTOTAL of Receipts This Page (optional)

100.42

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 75 / 181

(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 1430 ROLLING LINKS DRIVE

City

ALPHARETTA

State

GA

Zip Code

30004

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 ▼

458.13

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198958

Amount of Each Receipt this Period

51.37

B.

Full Name (Last, First, Middle Initial)

CHRISTOPHER R KIAH

Mailing Address 1430 ROLLING LINKS DRIVE

City

ALPHARETTA

State

GA

Zip Code

30004

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 ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199396

Amount of Each Receipt this Period

51.37

C.

Full Name (Last, First, Middle Initial)

CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City

BARTLETT

State

IL

Zip Code

60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199116

Amount of Each Receipt this Period

40.56

SUBTOTAL of Receipts This Page (optional)

143.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 76 / 181

(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)
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 ▼

402.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199553

Amount of Each Receipt this Period

40.56

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 ▼

230.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199163

Amount of Each Receipt this Period

25.80

C.

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 ▼

256.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199600

Amount of Each Receipt this Period

25.80

SUBTOTAL of Receipts This Page (optional)

92.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 77 / 181

(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)

JAMES P KING

Mailing Address 592 TURNER AVENUE

City

GLEN ELLYN

State

IL

Zip Code

60137

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 ▼

328.95

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199239

Amount of Each Receipt this Period

36.55

B.

Full Name (Last, First, Middle Initial)

JAMES P KING

Mailing Address 592 TURNER AVENUE

City

GLEN ELLYN

State

IL

Zip Code

60137

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 ▼

365.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199676

Amount of Each Receipt this Period

36.55

C.

Full Name (Last, First, Middle Initial)

TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City

LEBANON

State

PA

Zip Code

17042

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 ▼

200.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199453

Amount of Each Receipt this Period

20.26

SUBTOTAL of Receipts This Page (optional)

93.36

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 78 / 181

(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)

JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City

NORTHBROOK

State

IL

Zip Code

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 ▼

287.49

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199322

Amount of Each Receipt this Period

32.77

B.

Full Name (Last, First, Middle Initial)

JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City

NORTHBROOK

State

IL

Zip Code

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 ▼

320.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199759

Amount of Each Receipt this Period

32.77

C.

Full Name (Last, First, Middle Initial)

GARY L KOCHANKE

Mailing Address 743 CARDIGAN CT

City

NAPERVILLE

State

IL

Zip Code

60565

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 ▼

294.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199124

Amount of Each Receipt this Period

32.70

SUBTOTAL of Receipts This Page (optional)

98.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 79 / 181

(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 KOCHANER

Mailing Address 743 CARDIGAN CT

City

NAPERVILLE

State

IL

Zip Code

60565

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 ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199561

Amount of Each Receipt this Period

32.70

B.

Full Name (Last, First, Middle Initial)

JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City

VERNON HILLS

State

IL

Zip Code

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 ▼

365.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199120

Amount of Each Receipt this Period

41.36

C.

Full Name (Last, First, Middle Initial)

JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City

VERNON HILLS

State

IL

Zip Code

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 ▼

407.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199557

Amount of Each Receipt this Period

41.36

SUBTOTAL of Receipts This Page (optional)

115.42

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 80 / 181

(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)

JAKRISHNA KUCHIMANCHI

Mailing Address 1503 ALMADEN LN

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199238

Amount of Each Receipt this Period

31.52

B.

Full Name (Last, First, Middle Initial)

JAKRISHNA KUCHIMANCHI

Mailing Address 1503 ALMADEN LN

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.72

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199675

Amount of Each Receipt this Period

31.52

C.

Full Name (Last, First, Middle Initial)

Joseph Lacher

Mailing Address 2775 Sanders Road Suite A5

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199391

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

213.04

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 181

(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)

Joseph Lacher

Mailing Address 2775 Sanders Road Suite A5

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199828

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

MICHAEL A LAMONICA

Mailing Address 20580 HIGH RIDGE DR.

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199166

Amount of Each Receipt this Period

70.71

C.

Full Name (Last, First, Middle Initial)

MICHAEL A LAMONICA

Mailing Address 20580 HIGH RIDGE DR.

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199603

Amount of Each Receipt this Period

70.71

SUBTOTAL of Receipts This Page (optional)

291.42

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 82 / 181

(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 J Law

Mailing Address 3 Jackson Manor Court

City

Phoenix

State

MD

Zip Code

21131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President - Presiden

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1071.01

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199387

Amount of Each Receipt this Period

120.05

B.

Full Name (Last, First, Middle Initial)

Richard J Law

Mailing Address 3 Jackson Manor Court

City

Phoenix

State

MD

Zip Code

21131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President - Presiden

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1191.06

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199824

Amount of Each Receipt this Period

120.05

C.

Full Name (Last, First, Middle Initial)

PHILLIP E LAWSON

Mailing Address 1190 Palmer AVENUE

City

WINTER PARK

State

FL

Zip Code

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 ▼

712.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199328

Amount of Each Receipt this Period

79.96

SUBTOTAL of Receipts This Page (optional)

320.06

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 83 / 181

(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 E LAWSON

Mailing Address 1190 Palmer AVENUE

City

WINTER PARK

State

FL

Zip Code

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 ▼

792.72

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199765

Amount of Each Receipt this Period

79.96

B.

Full Name (Last, First, Middle Initial)

MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City

BELLEVUE

State

WA

Zip Code

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 ▼

570.05

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199361

Amount of Each Receipt this Period

64.17

C.

Full Name (Last, First, Middle Initial)

MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City

BELLEVUE

State

WA

Zip Code

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 ▼

634.22

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199798

Amount of Each Receipt this Period

64.17

SUBTOTAL of Receipts This Page (optional)

208.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 84 / 181

(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)

SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City

DEERFIELD

State

IL

Zip Code

60015

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 ▼

264.51

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198957

Amount of Each Receipt this Period

29.71

B.

Full Name (Last, First, Middle Initial)

SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City

DEERFIELD

State

IL

Zip Code

60015

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 ▼

294.22

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199395

Amount of Each Receipt this Period

29.71

C.

Full Name (Last, First, Middle Initial)

ANDREW P LEICHT

Mailing Address 2318 Coach Rd.

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.86

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199128

Amount of Each Receipt this Period

26.54

SUBTOTAL of Receipts This Page (optional)

85.96

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 / 181

(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)

ANDREW P LEIGHT

Mailing Address 2318 Coach Rd.

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199565

Amount of Each Receipt this Period

26.54

B.

Full Name (Last, First, Middle Initial)

NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City

ACWORTH

State

GA

Zip Code

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 ▼

200.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199194

Amount of Each Receipt this Period

22.67

C.

Full Name (Last, First, Middle Initial)

NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City

ACWORTH

State

GA

Zip Code

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 ▼

223.22

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199631

Amount of Each Receipt this Period

22.67

SUBTOTAL of Receipts This Page (optional)

71.88

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 86 / 181

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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)
CHRISTOPHER T LONGEWAY

Mailing Address 4536 N. Leavitt

City State Zip Code
CHICAGO IL 60625

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 ▼

276.45

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199177

Amount of Each Receipt this Period

31.25

B.

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

Mailing Address 4536 N. Leavitt

City State Zip Code
CHICAGO IL 60625

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 ▼

307.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199614

Amount of Each Receipt this Period

31.25

C.

Full Name (Last, First, Middle Initial)
ROBERT W LOPEZ Jr

Mailing Address 456 S. Wilke Road

City State Zip Code
Palatine IL 60074

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 ▼

235.99

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199175

Amount of Each Receipt this Period

26.51

SUBTOTAL of Receipts This Page (optional)

89.01

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 87 / 181

(check only one)

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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)

ROBERT W LOPEZ Jr

Mailing Address 456 S. Wilke Road

City

Palatine

State

IL

Zip Code

60074

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 ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199612

Amount of Each Receipt this Period

26.51

B.

Full Name (Last, First, Middle Initial)

GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City

GLENDAL

State

CA

Zip Code

91226

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 ▼

279.76

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199363

Amount of Each Receipt this Period

31.36

C.

Full Name (Last, First, Middle Initial)

GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City

GLENDAL

State

CA

Zip Code

91226

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 ▼

311.12

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199800

Amount of Each Receipt this Period

31.36

SUBTOTAL of Receipts This Page (optional)

89.23

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 88 / 181

(check only one)

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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)

COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City

SCHAUMBURG

State

IL

Zip Code

60193

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 ▼

204.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199634

Amount of Each Receipt this Period

20.88

B.

Full Name (Last, First, Middle Initial)

BENJAMIN E LUMICAO

Mailing Address 343 S. DEARBORN ST., APT. 504

City

CHICAGO

State

IL

Zip Code

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 ▼

300.76

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199222

Amount of Each Receipt this Period

33.64

C.

Full Name (Last, First, Middle Initial)

BENJAMIN E LUMICAO

Mailing Address 343 S. DEARBORN ST., APT. 504

City

CHICAGO

State

IL

Zip Code

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 ▼

334.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199659

Amount of Each Receipt this Period

33.64

SUBTOTAL of Receipts This Page (optional)

88.16

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 89 / 181

(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 Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199282

Amount of Each Receipt this Period

29.96

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 Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199719

Amount of Each Receipt this Period

29.96

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 ▼

367.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198981

Amount of Each Receipt this Period

41.62

SUBTOTAL of Receipts This Page (optional)

101.54

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 90 / 181

(check only one)

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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)
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 ▼

408.80

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199419

Amount of Each Receipt this Period

41.62

B.

Full Name (Last, First, Middle Initial)
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 ▼

202.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199660

Amount of Each Receipt this Period

20.48

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 ▼

729.37

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199207

Amount of Each Receipt this Period

82.45

SUBTOTAL of Receipts This Page (optional)

144.55

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 91 / 181

(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

BARRINGTON HILL

State

IL

Zip Code

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 ▼

811.82

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199644

Amount of Each Receipt this Period

82.45

B.

Full Name (Last, First, Middle Initial)

JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City

Hawthorn Woods

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 ▼

361.84

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199153

Amount of Each Receipt this Period

40.56

C.

Full Name (Last, First, Middle Initial)

JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City

Hawthorn Woods

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 ▼

402.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199590

Amount of Each Receipt this Period

40.56

SUBTOTAL of Receipts This Page (optional)

163.57

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 92 / 181

(check only one)

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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)

MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City

GURNEE

State

IL

Zip Code

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 ▼

218.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199345

Amount of Each Receipt this Period

24.66

B.

Full Name (Last, First, Middle Initial)

MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City

GURNEE

State

IL

Zip Code

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 ▼

242.80

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199782

Amount of Each Receipt this Period

24.66

C.

Full Name (Last, First, Middle Initial)

EVA M MCINTEE

Mailing Address 103 Wateredge Court

City

Safety Harbor

State

FL

Zip Code

34695

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 ▼

339.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199340

Amount of Each Receipt this Period

38.34

SUBTOTAL of Receipts This Page (optional)

87.66

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 93 / 181

(check only one)

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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)

EVAM MCINTEE

Mailing Address 103 Wateredge Court

City

Safety Harbor

State

FL

Zip Code

34695

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 ▼

377.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199777

Amount of Each Receipt this Period

38.34

B.

Full Name (Last, First, Middle Initial)

MICHAEL MCKINNEY

Mailing Address 5065 Raintree Circle

City

Parker

State

CO

Zip Code

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 ▼

232.39

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199036

Amount of Each Receipt this Period

25.99

C.

Full Name (Last, First, Middle Initial)

MICHAEL MCKINNEY

Mailing Address 5065 Raintree Circle

City

Parker

State

CO

Zip Code

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 ▼

258.38

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199473

Amount of Each Receipt this Period

25.99

SUBTOTAL of Receipts This Page (optional)

90.32

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 94 / 181

(check only one)

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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)

PETER D MCPHERSON

Mailing Address 180 EVERGREEN AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Actuary and Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.84

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199143

Amount of Each Receipt this Period

33.20

B.

Full Name (Last, First, Middle Initial)

PETER D MCPHERSON

Mailing Address 180 EVERGREEN AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Actuary and Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199580

Amount of Each Receipt this Period

33.20

C.

Full Name (Last, First, Middle Initial)

JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City

LAKE ZURICH

State

IL

Zip Code

60047

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 ▼

215.75

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199071

Amount of Each Receipt this Period

24.39

SUBTOTAL of Receipts This Page (optional)

90.79

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 95 / 181

(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)

JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City

LAKE ZURICH

State

IL

Zip Code

60047

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 ▼

240.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199508

Amount of Each Receipt this Period

24.39

B.

Full Name (Last, First, Middle Initial)

TENA MELFI

Mailing Address 333 E Woodland Rd

City

Lake Bluff

State

IL

Zip Code

60044

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 ▼

208.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199817

Amount of Each Receipt this Period

20.98

C.

Full Name (Last, First, Middle Initial)

GARY A MELLINI

Mailing Address 21050 PRESTWICK DRIVE

City

BARRINGTON

State

IL

Zip Code

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 ▼

315.57

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198973

Amount of Each Receipt this Period

35.37

SUBTOTAL of Receipts This Page (optional)

80.74

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 181

(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)

GARY A MELLINI

Mailing Address 21050 PRESTWICK DRIVE

City

BARRINGTON

State

IL

Zip Code

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 ▼

350.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199411

Amount of Each Receipt this Period

35.37

B.

Full Name (Last, First, Middle Initial)

FREDERICK J MILLER

Mailing Address 6975 MEADOW POINT TER

City

NEW MARKET

State

MD

Zip Code

21774

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional EB Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199087

Amount of Each Receipt this Period

28.59

C.

Full Name (Last, First, Middle Initial)

FREDERICK J MILLER

Mailing Address 6975 MEADOW POINT TER

City

NEW MARKET

State

MD

Zip Code

21774

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional EB Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199524

Amount of Each Receipt this Period

28.59

SUBTOTAL of Receipts This Page (optional)

92.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 97 / 181

(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 M MILLER

Mailing Address 1011 Redwood Drive

City

ALGONQUIN

State

IL

Zip Code

60102

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 ▼

207.18

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199258

Amount of Each Receipt this Period

23.42

B.

Full Name (Last, First, Middle Initial)

STEVEN M MILLER

Mailing Address 1011 Redwood Drive

City

ALGONQUIN

State

IL

Zip Code

60102

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 ▼

230.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199695

Amount of Each Receipt this Period

23.42

C.

Full Name (Last, First, Middle Initial)

MARCIE E MOLEK

Mailing Address 400 KEVIN LANE

City

GRAYSLAKE

State

IL

Zip Code

60030

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 ▼

216.31

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199138

Amount of Each Receipt this Period

24.35

SUBTOTAL of Receipts This Page (optional)

71.19

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 98 / 181

(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

GRAYSLAKE

State

IL

Zip Code

60030

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 ▼

240.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199575

Amount of Each Receipt this Period

24.35

B.

Full Name (Last, First, Middle Initial)

DEBBIE A MORALES

Mailing Address 21285 S. BOSCHOME CIRCLE

City

KILDEER

State

IL

Zip Code

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 ▼

320.43

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199298

Amount of Each Receipt this Period

36.07

C.

Full Name (Last, First, Middle Initial)

DEBBIE A MORALES

Mailing Address 21285 S. BOSCHOME CIRCLE

City

KILDEER

State

IL

Zip Code

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 ▼

356.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199735

Amount of Each Receipt this Period

36.07

SUBTOTAL of Receipts This Page (optional)

96.49

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 99 / 181

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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)

KAREN S MORRIS

Mailing Address 27707 LA VISTA DRIVE

City

MUNDELEIN

State

IL

Zip Code

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 ▼

386.45

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199226

Amount of Each Receipt this Period

43.41

B.

Full Name (Last, First, Middle Initial)

KAREN S MORRIS

Mailing Address 27707 LA VISTA DRIVE

City

MUNDELEIN

State

IL

Zip Code

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 ▼

429.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199663

Amount of Each Receipt this Period

43.41

C.

Full Name (Last, First, Middle Initial)

MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

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 ▼

311.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199034

Amount of Each Receipt this Period

35.77

SUBTOTAL of Receipts This Page (optional)

122.59

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 100 / 181

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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

NORTHBROOK

State

IL

Zip Code

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 ▼

347.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199471

Amount of Each Receipt this Period

35.77

B.

Full Name (Last, First, Middle Initial)

MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

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 ▼

357.66

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199125

Amount of Each Receipt this Period

40.26

C.

Full Name (Last, First, Middle Initial)

MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

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 ▼

397.92

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199562

Amount of Each Receipt this Period

40.26

SUBTOTAL of Receipts This Page (optional)

116.29

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 / 181

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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)

MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City

Arlington Heights

State

IL

Zip Code

60004

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 ▼

357.93

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199311

Amount of Each Receipt this Period

39.77

B.

Full Name (Last, First, Middle Initial)

MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City

Arlington Heights

State

IL

Zip Code

60004

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 ▼

397.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199748

Amount of Each Receipt this Period

39.77

C.

Full Name (Last, First, Middle Initial)

DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199248

Amount of Each Receipt this Period

57.60

SUBTOTAL of Receipts This Page (optional)

137.14

TOTAL This Period (last page this line number only)

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 181

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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 G NADIG

Mailing Address 2950 LAKE PLACID

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.28

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199685

Amount of Each Receipt this Period

57.60

B.

Full Name (Last, First, Middle Initial)

DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City

LAKE BARRINGTON

State

IL

Zip Code

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 ▼

1060.51

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199105

Amount of Each Receipt this Period

118.87

C.

Full Name (Last, First, Middle Initial)

DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City

LAKE BARRINGTON

State

IL

Zip Code

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 ▼

1179.38

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199542

Amount of Each Receipt this Period

118.87

SUBTOTAL of Receipts This Page (optional)

295.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 103 / 181

(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

DEER PARK

State

IL

Zip Code

60010

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 ▼

498.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199313

Amount of Each Receipt this Period

56.30

B.

Full Name (Last, First, Middle Initial)

PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City

DEER PARK

State

IL

Zip Code

60010

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 ▼

554.32

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199750

Amount of Each Receipt this Period

56.30

C.

Full Name (Last, First, Middle Initial)

THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City

WAUKEGAN

State

IL

Zip Code

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 ▼

278.42

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199240

Amount of Each Receipt this Period

31.06

SUBTOTAL of Receipts This Page (optional)

143.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 104 / 181

(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)

THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City

WAUKEGAN

State

IL

Zip Code

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 ▼

309.48

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199677

Amount of Each Receipt this Period

31.06

B.

Full Name (Last, First, Middle Initial)

NICHOLAS A NOTTE

Mailing Address 743 OLD WESTBURY RD.

City

CRYSTAL LAKE

State

IL

Zip Code

60012

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 ▼

384.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199374

Amount of Each Receipt this Period

43.42

C.

Full Name (Last, First, Middle Initial)

NICHOLAS A NOTTE

Mailing Address 743 OLD WESTBURY RD.

City

CRYSTAL LAKE

State

IL

Zip Code

60012

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 ▼

427.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199811

Amount of Each Receipt this Period

43.42

SUBTOTAL of Receipts This Page (optional)

117.90

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 181

(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 M O'Brien

Mailing Address 976 Hampton Park

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP - Emerging Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.57

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199386

Amount of Each Receipt this Period

64.73

B.

Full Name (Last, First, Middle Initial)

Patrick M O'Brien

Mailing Address 976 Hampton Park

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP - Emerging Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

647.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199823

Amount of Each Receipt this Period

64.73

C.

Full Name (Last, First, Middle Initial)

RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City

LAKE ZURICH

State

IL

Zip Code

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 ▼

200.94

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199534

Amount of Each Receipt this Period

20.33

SUBTOTAL of Receipts This Page (optional)

149.79

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 106 / 181

(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 O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.38

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198994

Amount of Each Receipt this Period

30.26

B.

Full Name (Last, First, Middle Initial)

MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199432

Amount of Each Receipt this Period

30.26

C.

Full Name (Last, First, Middle Initial)

ROGER D ODLE II, II

Mailing Address 5170 BARCROFT DRIVE

City

HOFFMAN ESTATES

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199214

Amount of Each Receipt this Period

41.26

SUBTOTAL of Receipts This Page (optional)

101.78

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 181

(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)

ROGER D ODLE II, II

Mailing Address 5170 BARCROFT DRIVE

City

HOFFMAN ESTATES

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199651

Amount of Each Receipt this Period

41.26

B.

Full Name (Last, First, Middle Initial)

KATHY A OLCESE

Mailing Address 133 S. Mitchell

City

Arlington Heights

State

IL

Zip Code

60005

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 ▼

229.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199088

Amount of Each Receipt this Period

25.86

C.

Full Name (Last, First, Middle Initial)

KATHY A OLCESE

Mailing Address 133 S. Mitchell

City

Arlington Heights

State

IL

Zip Code

60005

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 ▼

255.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199525

Amount of Each Receipt this Period

25.86

SUBTOTAL of Receipts This Page (optional)

92.98

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 108 / 181

(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)

KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City

DEERFIELD

State

IL

Zip Code

60015

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 ▼

359.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199080

Amount of Each Receipt this Period

40.16

B.

Full Name (Last, First, Middle Initial)

KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City

DEERFIELD

State

IL

Zip Code

60015

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 ▼

400.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199517

Amount of Each Receipt this Period

40.16

C.

Full Name (Last, First, Middle Initial)

JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City

LIBERTYVILLE

State

IL

Zip Code

60048

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 ▼

632.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199304

Amount of Each Receipt this Period

71.16

SUBTOTAL of Receipts This Page (optional)

151.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 109 / 181

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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)

JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City

LIBERTYVILLE

State

IL

Zip Code

60048

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 ▼

704.12

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199741

Amount of Each Receipt this Period

71.16

B.

Full Name (Last, First, Middle Initial)

PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City

Hawthorn Woods

State

IL

Zip Code

60047

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 ▼

386.63

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199069

Amount of Each Receipt this Period

43.43

C.

Full Name (Last, First, Middle Initial)

PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City

Hawthorn Woods

State

IL

Zip Code

60047

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 ▼

430.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199506

Amount of Each Receipt this Period

43.43

SUBTOTAL of Receipts This Page (optional)

158.02

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 110 / 181

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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)

DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City

EDGEWATER

State

MD

Zip Code

21037

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 ▼

389.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199029

Amount of Each Receipt this Period

44.05

B.

Full Name (Last, First, Middle Initial)

DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City

EDGEWATER

State

MD

Zip Code

21037

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 ▼

433.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199466

Amount of Each Receipt this Period

44.05

C.

Full Name (Last, First, Middle Initial)

MAYUR M PATEL

Mailing Address 742 E PARKVIEW CT

City

ROSELLE

State

IL

Zip Code

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 ▼

285.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199149

Amount of Each Receipt this Period

32.18

SUBTOTAL of Receipts This Page (optional)

120.28

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 111 / 181

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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)

MAYUR M PATEL

Mailing Address 742 E PARKVIEW CT

City

ROSELLE

State

IL

Zip Code

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 ▼

318.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199586

Amount of Each Receipt this Period

32.18

B.

Full Name (Last, First, Middle Initial)

CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

General Vice President Em

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

693.99

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199018

Amount of Each Receipt this Period

77.79

C.

Full Name (Last, First, Middle Initial)

CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

General Vice President Em

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

771.78

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199456

Amount of Each Receipt this Period

77.79

SUBTOTAL of Receipts This Page (optional)

187.76

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 112 / 181

(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)

LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Homeowner Initiative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.97

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199242

Amount of Each Receipt this Period

39.17

B.

Full Name (Last, First, Middle Initial)

LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Homeowner Initiative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199679

Amount of Each Receipt this Period

39.17

C.

Full Name (Last, First, Middle Initial)

RONALD J PEPPING

Mailing Address 2721 Acorn Ct.

City

West Dundee

State

IL

Zip Code

60118

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 ▼

275.99

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199190

Amount of Each Receipt this Period

31.07

SUBTOTAL of Receipts This Page (optional)

109.41

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 113 / 181

(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 J PEPPING

Mailing Address 2721 Acorn Ct.

City State Zip Code
West Dundee IL 60118

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 ▼

307.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199627

Amount of Each Receipt this Period

31.07

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 Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198985

Amount of Each Receipt this Period

52.83

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 Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199423

Amount of Each Receipt this Period

52.83

SUBTOTAL of Receipts This Page (optional)

136.73

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 181

(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 M PETERS

Mailing Address 6727 N Sioux Ave

City

CHICAGO

State

IL

Zip Code

60646

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 ▼

275.31

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199352

Amount of Each Receipt this Period

30.99

B.

Full Name (Last, First, Middle Initial)

JOHN M PETERS

Mailing Address 6727 N Sioux Ave

City

CHICAGO

State

IL

Zip Code

60646

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 ▼

306.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199789

Amount of Each Receipt this Period

30.99

C.

Full Name (Last, First, Middle Initial)

THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City

NAPERVILLE

State

IL

Zip Code

60565

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 ▼

280.49

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199373

Amount of Each Receipt this Period

31.37

SUBTOTAL of Receipts This Page (optional)

93.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 115 / 181

(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)
THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

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 Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.86

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199810

Amount of Each Receipt this Period

31.37

B.

Full Name (Last, First, Middle Initial)
SAMUEL H PILCH

Mailing Address 4519 HICKORY COURT

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Group Vice President & Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1182618

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
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 ▼

654.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199104

Amount of Each Receipt this Period

74.04

SUBTOTAL of Receipts This Page (optional)

1105.41

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 116 / 181

(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 C PINTOZZI

Mailing Address 2116 W CHURCHILL ST

City

CHICAGO

State

IL

Zip Code

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 ▼

729.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199541

Amount of Each Receipt this Period

74.04

B.

Full Name (Last, First, Middle Initial)

Mark D Pitchford

Mailing Address 653 Hinman Ave

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP Direct Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199377

Amount of Each Receipt this Period

67.88

C.

Full Name (Last, First, Middle Initial)

Mark D Pitchford

Mailing Address 653 Hinman Ave

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP Direct Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.92

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199814

Amount of Each Receipt this Period

67.88

SUBTOTAL of Receipts This Page (optional)

209.80

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 117 / 181

(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 PRENDERGAST

Mailing Address 2816 HAVEN LANE

City

LINDENHURST

State

IL

Zip Code

60046

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 ▼

430.77

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198979

Amount of Each Receipt this Period

48.49

B.

Full Name (Last, First, Middle Initial)

DAVID J PRENDERGAST

Mailing Address 2816 HAVEN LANE

City

LINDENHURST

State

IL

Zip Code

60046

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 ▼

479.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199417

Amount of Each Receipt this Period

48.49

C.

Full Name (Last, First, Middle Initial)

THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199681

Amount of Each Receipt this Period

22.45

SUBTOTAL of Receipts This Page (optional)

119.43

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 118 / 181

(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)

JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City

ARLINGTON HGTS

State

IL

Zip Code

60005

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 ▼

297.38

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199362

Amount of Each Receipt this Period

33.62

B.

Full Name (Last, First, Middle Initial)

JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City

ARLINGTON HGTS

State

IL

Zip Code

60005

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 ▼

331.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199799

Amount of Each Receipt this Period

33.62

C.

Full Name (Last, First, Middle Initial)

MARY J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City

ARLINGTON HEIGH

State

IL

Zip Code

60005

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 ▼

369.83

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199270

Amount of Each Receipt this Period

42.15

SUBTOTAL of Receipts This Page (optional)

109.39

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 119 / 181

(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 QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City

ARLINGTON HEIGH

State

IL

Zip Code

60005

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 ▼

411.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199707

Amount of Each Receipt this Period

42.15

B.

Full Name (Last, First, Middle Initial)

JOHN B REARDON

Mailing Address 441 KELLY LANE

City

CRYSTAL LAKE

State

IL

Zip Code

60012

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 ▼

408.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198961

Amount of Each Receipt this Period

45.80

C.

Full Name (Last, First, Middle Initial)

JOHN B REARDON

Mailing Address 441 KELLY LANE

City

CRYSTAL LAKE

State

IL

Zip Code

60012

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 ▼

454.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199399

Amount of Each Receipt this Period

45.80

SUBTOTAL of Receipts This Page (optional)

133.75

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 120 / 181

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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)

KEVIN P RICE

Mailing Address 618 Burdick St.

City

LIBERTYVILLE

State

IL

Zip Code

60048

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 ▼

340.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199161

Amount of Each Receipt this Period

38.20

B.

Full Name (Last, First, Middle Initial)

KEVIN P RICE

Mailing Address 618 Burdick St.

City

LIBERTYVILLE

State

IL

Zip Code

60048

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 ▼

378.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199598

Amount of Each Receipt this Period

38.20

C.

Full Name (Last, First, Middle Initial)

BRIAN R RICHARD

Mailing Address 37 JOSEPH PLACE

City

WAYNE

State

NJ

Zip Code

07470

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.37

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198954

Amount of Each Receipt this Period

26.89

SUBTOTAL of Receipts This Page (optional)

103.29

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 121 / 181

(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 R RICHARD

Mailing Address 37 JOSEPH PLACE

City

WAYNE

State

NJ

Zip Code

07470

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199392

Amount of Each Receipt this Period

26.89

B.

Full Name (Last, First, Middle Initial)

JOSEPH J RICHARDSON

Mailing Address 4968 Astor Court

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP-Protection Distributi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199021

Amount of Each Receipt this Period

85.38

C.

Full Name (Last, First, Middle Initial)

JOSEPH J RICHARDSON

Mailing Address 4968 Astor Court

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP-Protection Distributi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

837.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199459

Amount of Each Receipt this Period

85.38

SUBTOTAL of Receipts This Page (optional)

197.65

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 181

(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)
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 CompanyOccupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199234

Amount of Each Receipt this Period

27.51

B.Full Name (Last, First, Middle Initial)
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 CompanyOccupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199671

Amount of Each Receipt this Period

27.51

C.Full Name (Last, First, Middle Initial)
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 CompanyOccupation
AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199164

Amount of Each Receipt this Period

48.19

SUBTOTAL of Receipts This Page (optional)

103.21

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 123 / 181

(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)

MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City

OAK LAWN

State

IL

Zip Code

60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199601

Amount of Each Receipt this Period

48.19

B.

Full Name (Last, First, Middle Initial)

TED ROBERTS

Mailing Address 62 Bart Drive

City

Canton

State

CT

Zip Code

06019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199327

Amount of Each Receipt this Period

31.53

C.

Full Name (Last, First, Middle Initial)

TED ROBERTS

Mailing Address 62 Bart Drive

City

Canton

State

CT

Zip Code

06019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199764

Amount of Each Receipt this Period

31.53

SUBTOTAL of Receipts This Page (optional)

111.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 124 / 181

(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 J ROCHE

Mailing Address 270 KINGSWAY DRIVE

City

AURORA

State

IL

Zip Code

60506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.81

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199178

Amount of Each Receipt this Period

103.85

B.

Full Name (Last, First, Middle Initial)

MICHAEL J ROCHE

Mailing Address 270 KINGSWAY DRIVE

City

AURORA

State

IL

Zip Code

60506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1021.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199615

Amount of Each Receipt this Period

103.85

C.

Full Name (Last, First, Middle Initial)

GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City

RIVER FOREST

State

IL

Zip Code

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 ▼

365.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199100

Amount of Each Receipt this Period

41.36

SUBTOTAL of Receipts This Page (optional)

249.06

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 181

(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)

GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City

RIVER FOREST

State

IL

Zip Code

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 ▼

407.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199537

Amount of Each Receipt this Period

41.36

B.

Full Name (Last, First, Middle Initial)

DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City

HINSDALE

State

IL

Zip Code

60521

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 ▼

308.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199173

Amount of Each Receipt this Period

34.88

C.

Full Name (Last, First, Middle Initial)

DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City

HINSDALE

State

IL

Zip Code

60521

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 ▼

343.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199610

Amount of Each Receipt this Period

34.88

SUBTOTAL of Receipts This Page (optional)

111.12

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 126 / 181

(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 ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City

DOWNERS GROVE

State

IL

Zip Code

60515

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
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199213

Amount of Each Receipt this Period

38.14

B.

Full Name (Last, First, Middle Initial)

JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City

DOWNERS GROVE

State

IL

Zip Code

60515

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 ▼

377.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199650

Amount of Each Receipt this Period

38.14

C.

Full Name (Last, First, Middle Initial)

DOREEN M RYAN

Mailing Address 17 ALSTON COURT

City

RED BANK

State

NJ

Zip Code

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 ▼

220.58

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199448

Amount of Each Receipt this Period

22.23

SUBTOTAL of Receipts This Page (optional)

98.51

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 181

(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)

PAUL R RYSKE

Mailing Address 898 E. LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

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 ▼

363.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199098

Amount of Each Receipt this Period

40.96

B.

Full Name (Last, First, Middle Initial)

PAUL R RYSKE

Mailing Address 898 E. LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

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 ▼

404.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199535

Amount of Each Receipt this Period

40.96

C.

Full Name (Last, First, Middle Initial)

MICHAEL A SCARDINA

Mailing Address 51 SOUTH ROYAL OAK

City

VERNON HILLS

State

IL

Zip Code

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 ▼

234.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199079

Amount of Each Receipt this Period

29.35

SUBTOTAL of Receipts This Page (optional)

111.27

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 181

(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 SCARDINA

Mailing Address 51 SOUTH ROYAL OAK

City

VERNON HILLS

State

IL

Zip Code

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 ▼

264.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199516

Amount of Each Receipt this Period

29.35

B.

Full Name (Last, First, Middle Initial)

PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City

HAWTHORN WOODS

State

IL

Zip Code

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 ▼

279.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199217

Amount of Each Receipt this Period

31.59

C.

Full Name (Last, First, Middle Initial)

PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City

HAWTHORN WOODS

State

IL

Zip Code

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 ▼

311.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199654

Amount of Each Receipt this Period

31.59

SUBTOTAL of Receipts This Page (optional)

92.53

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 129 / 181

(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 E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City

HAWTHORN WOODS

State

IL

Zip Code

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 ▼

492.79

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199012

Amount of Each Receipt this Period

55.19

B.

Full Name (Last, First, Middle Initial)

STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City

HAWTHORN WOODS

State

IL

Zip Code

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 ▼

547.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199450

Amount of Each Receipt this Period

55.19

C.

Full Name (Last, First, Middle Initial)

JEFFREY C SCHULTZ

Mailing Address 573 MADISON LN

City

LINDENHURST

State

IL

Zip Code

60046

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 ▼

244.46

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199076

Amount of Each Receipt this Period

27.46

SUBTOTAL of Receipts This Page (optional)

137.84

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 130 / 181

(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)

JEFFREY C SCHULTZ

Mailing Address 573 MADISON LN

City

LINDENHURST

State

IL

Zip Code

60046

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 ▼

271.92

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199513

Amount of Each Receipt this Period

27.46

B.

Full Name (Last, First, Middle Initial)

DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City

BUFFALO GROVE

State

IL

Zip Code

60089

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 ▼

246.33

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199144

Amount of Each Receipt this Period

27.73

C.

Full Name (Last, First, Middle Initial)

DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City

BUFFALO GROVE

State

IL

Zip Code

60089

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 ▼

274.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199581

Amount of Each Receipt this Period

27.73

SUBTOTAL of Receipts This Page (optional)

82.92

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 131 / 181

(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 SCHWARTZER

Mailing Address 128 Waverly Circle

City

Phoenixville

State

PA

Zip Code

19460

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 ▼

440.33

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199281

Amount of Each Receipt this Period

49.65

B.

Full Name (Last, First, Middle Initial)

DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City

Phoenixville

State

PA

Zip Code

19460

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 ▼

489.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199718

Amount of Each Receipt this Period

49.65

C.

Full Name (Last, First, Middle Initial)

STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City

Chicago

State

IL

Zip Code

60611

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 ▼

387.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199206

Amount of Each Receipt this Period

43.62

SUBTOTAL of Receipts This Page (optional)

142.92

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 181

(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)

STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City

Chicago

State

IL

Zip Code

60611

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 ▼

431.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	1	0

Transaction ID: A2010-1199643

Amount of Each Receipt this Period

43.62

B.

Full Name (Last, First, Middle Initial)

STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City

WHEATON

State

IL

Zip Code

60189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP & CFO Allstate Investm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	0

Transaction ID: A2010-1199171

Amount of Each Receipt this Period

86.46

C.

Full Name (Last, First, Middle Initial)

STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City

WHEATON

State

IL

Zip Code

60189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP & CFO Allstate Investm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	1	0

Transaction ID: A2010-1199608

Amount of Each Receipt this Period

86.46

SUBTOTAL of Receipts This Page (optional)

216.54

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 133 / 181

(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 ▼

201.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199530

Amount of Each Receipt this Period

20.28

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 ▼

221.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199697

Amount of Each Receipt this Period

22.34

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 ▼

289.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199003

Amount of Each Receipt this Period

32.78

SUBTOTAL of Receipts This Page (optional)

75.40

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 181

(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)

ROBERT L SIMMONS

Mailing Address 418 DEUCE DRIVE

City

WALL

State

NJ

Zip Code

07719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

322.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199441

Amount of Each Receipt this Period

32.78

B.

Full Name (Last, First, Middle Initial)

KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199331

Amount of Each Receipt this Period

39.43

C.

Full Name (Last, First, Middle Initial)

KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

389.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199768

Amount of Each Receipt this Period

39.43

SUBTOTAL of Receipts This Page (optional)

111.64

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 181

(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)

ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City

HIGHLAND PARK

State

IL

Zip Code

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 ▼

241.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199102

Amount of Each Receipt this Period

27.05

B.

Full Name (Last, First, Middle Initial)

ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City

HIGHLAND PARK

State

IL

Zip Code

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 ▼

268.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199539

Amount of Each Receipt this Period

27.05

C.

Full Name (Last, First, Middle Initial)

KIMBERLY J SLOANE

Mailing Address 378 N. VISTA AVE

City

LOMBARD

State

IL

Zip Code

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 ▼

363.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199196

Amount of Each Receipt this Period

40.96

SUBTOTAL of Receipts This Page (optional)

95.06

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 136 / 181

(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 ▼

404.84

Date of Receipt

05 / **21** / **2010**

Transaction ID: A2010-1199633

Amount of Each Receipt this Period

40.96

B.

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 ▼

310.32

Date of Receipt

05 / **07** / **2010**

Transaction ID: A2010-1199285

Amount of Each Receipt this Period

34.84

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 ▼

345.16

Date of Receipt

05 / **21** / **2010**

Transaction ID: A2010-1199722

Amount of Each Receipt this Period

34.84

SUBTOTAL of Receipts This Page (optional)

110.64

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 137 / 181

(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)

ELIAS SMITH

Mailing Address 2751 SW BEAR PAW TRAIL

City

PALM CITY

State

FL

Zip Code

34990

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Inside Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199008

Amount of Each Receipt this Period

23.14

B.

Full Name (Last, First, Middle Initial)

ELIAS SMITH

Mailing Address 2751 SW BEAR PAW TRAIL

City

PALM CITY

State

FL

Zip Code

34990

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Inside Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199446

Amount of Each Receipt this Period

23.14

C.

Full Name (Last, First, Middle Initial)

RANDALL D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City

Scottsdale

State

AZ

Zip Code

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 ▼

283.31

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199323

Amount of Each Receipt this Period

32.03

SUBTOTAL of Receipts This Page (optional)

78.31

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 138 / 181

(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 D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City

Scottsdale

State

AZ

Zip Code

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 ▼

315.34

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199760

Amount of Each Receipt this Period

32.03

B.

Full Name (Last, First, Middle Initial)

STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Vice President Pro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.12

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199272

Amount of Each Receipt this Period

82.04

C.

Full Name (Last, First, Middle Initial)

STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Vice President Pro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.16

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199709

Amount of Each Receipt this Period

82.04

SUBTOTAL of Receipts This Page (optional)

196.11

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 139 / 181

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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)

KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City

GLENVIEW

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.03

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199237

Amount of Each Receipt this Period

34.19

B.

Full Name (Last, First, Middle Initial)

KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City

GLENVIEW

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.22

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199674

Amount of Each Receipt this Period

34.19

C.

Full Name (Last, First, Middle Initial)

EDWIN M SPECHT

Mailing Address 740 AMBRIA DRIVE

City

MUNDELEIN

State

IL

Zip Code

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 ▼

341.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199027

Amount of Each Receipt this Period

38.28

SUBTOTAL of Receipts This Page (optional)

106.66

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 140 / 181

(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)
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 ▼

379.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199464

Amount of Each Receipt this Period

38.28

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 ▼

251.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199230

Amount of Each Receipt this Period

28.07

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 ▼

279.62

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199667

Amount of Each Receipt this Period

28.07

SUBTOTAL of Receipts This Page (optional)

94.42

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 141 / 181

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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)

MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City

GURNEE

State

IL

Zip Code

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 ▼

440.28

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199083

Amount of Each Receipt this Period

50.08

B.

Full Name (Last, First, Middle Initial)

MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City

GURNEE

State

IL

Zip Code

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 ▼

490.36

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199520

Amount of Each Receipt this Period

50.08

C.

Full Name (Last, First, Middle Initial)

EMORY D STEPHENS JR, Jr.

Mailing Address 4711 N WOLCOTT AVE

City

CHICAGO

State

IL

Zip Code

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 ▼

368.46

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199053

Amount of Each Receipt this Period

41.30

SUBTOTAL of Receipts This Page (optional)

141.46

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 142 / 181

(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)

EMORY D STEPHENS JR, Jr.

Mailing Address 4711 N WOLCOTT AVE

City

CHICAGO

State

IL

Zip Code

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 ▼

409.76

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199490

Amount of Each Receipt this Period

41.30

B.

Full Name (Last, First, Middle Initial)

GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City

ATLANTIC BEACH

State

FL

Zip Code

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 ▼

362.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199062

Amount of Each Receipt this Period

40.84

C.

Full Name (Last, First, Middle Initial)

GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City

ATLANTIC BEACH

State

FL

Zip Code

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 ▼

402.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199499

Amount of Each Receipt this Period

40.84

SUBTOTAL of Receipts This Page (optional)

122.98

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 143 / 181

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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)
MYRON E STOUFFER

Mailing Address 1528 JESSICA 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 Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.16

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199058

Amount of Each Receipt this Period

26.36

B.

Full Name (Last, First, Middle Initial)
MYRON E STOUFFER

Mailing Address 1528 JESSICA 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 Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199495

Amount of Each Receipt this Period

26.36

C.

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 ▼

239.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198955

Amount of Each Receipt this Period

26.72

SUBTOTAL of Receipts This Page (optional)

79.44

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 144 / 181

(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 A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City

GURNEE

State

IL

Zip Code

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 ▼

266.16

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199393

Amount of Each Receipt this Period

26.72

B.

Full Name (Last, First, Middle Initial)

KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.84

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199109

Amount of Each Receipt this Period

58.28

C.

Full Name (Last, First, Middle Initial)

KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.12

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199546

Amount of Each Receipt this Period

58.28

SUBTOTAL of Receipts This Page (optional)

143.28

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 145 / 181

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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)

JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City

ELK GROVE

State

IL

Zip Code

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 ▼

351.61

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199148

Amount of Each Receipt this Period

39.41

B.

Full Name (Last, First, Middle Initial)

JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City

ELK GROVE

State

IL

Zip Code

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 ▼

391.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199585

Amount of Each Receipt this Period

39.41

C.

Full Name (Last, First, Middle Initial)

BENJAMIN A TARVER

Mailing Address 2495 EMERALD LANE

City

LINDENHURST

State

IL

Zip Code

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 ▼

213.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199001

Amount of Each Receipt this Period

23.92

SUBTOTAL of Receipts This Page (optional)

102.74

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 146 / 181

(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)

BENJAMIN A TARVER

Mailing Address 2495 EMERALD LANE

City

LINDENHURST

State

IL

Zip Code

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 ▼

237.36

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199439

Amount of Each Receipt this Period

23.92

B.

Full Name (Last, First, Middle Initial)

JANICE M TAYLOR

Mailing Address 7335 ATHLONE

City

HOUSTON

State

TX

Zip Code

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 ▼

216.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199308

Amount of Each Receipt this Period

24.18

C.

Full Name (Last, First, Middle Initial)

JANICE M TAYLOR

Mailing Address 7335 ATHLONE

City

HOUSTON

State

TX

Zip Code

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 ▼

240.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199745

Amount of Each Receipt this Period

24.18

SUBTOTAL of Receipts This Page (optional)

72.28

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 147 / 181

(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 THOMAS

Mailing Address 604 BRIER STREET

City State Zip Code
KENILWORTH IL 60043

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 ▼

212.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199809

Amount of Each Receipt this Period

21.41

B.

Full Name (Last, First, Middle Initial)
GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

City State Zip Code
CHICAGO IL 60649

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 ▼

285.46

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199151

Amount of Each Receipt this Period

31.86

C.

Full Name (Last, First, Middle Initial)
GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

City State Zip Code
CHICAGO IL 60649

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 ▼

317.32

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199588

Amount of Each Receipt this Period

31.86

SUBTOTAL of Receipts This Page (optional)

85.13

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 148 / 181

(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)

MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City

CHICAGO

State

IL

Zip Code

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 ▼

247.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199318

Amount of Each Receipt this Period

28.00

B.

Full Name (Last, First, Middle Initial)

MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City

CHICAGO

State

IL

Zip Code

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 ▼

275.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199755

Amount of Each Receipt this Period

28.00

C.

Full Name (Last, First, Middle Initial)

WILLIAM J THOMPSON

Mailing Address 1104 Spruce Run Drive

City

Roanoke

State

TX

Zip Code

76262

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 ▼

366.63

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199050

Amount of Each Receipt this Period

41.27

SUBTOTAL of Receipts This Page (optional)

97.27

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 149 / 181

(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 J THOMPSON

Mailing Address 1104 Spruce Run Drive

City

Roanoke

State

TX

Zip Code

76262

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 ▼

407.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199487

Amount of Each Receipt this Period

41.27

B.

Full Name (Last, First, Middle Initial)

JAMES C THOMSON

Mailing Address 531 S ALLEN LANE

City

ARLINGTON HTS

State

IL

Zip Code

60005

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 ▼

296.82

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199172

Amount of Each Receipt this Period

32.98

C.

Full Name (Last, First, Middle Initial)

JAMES C THOMSON

Mailing Address 531 S ALLEN LANE

City

ARLINGTON HTS

State

IL

Zip Code

60005

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 ▼

329.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199609

Amount of Each Receipt this Period

32.98

SUBTOTAL of Receipts This Page (optional)

107.23

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 150 / 181

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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 E TRANSON

Mailing Address 2644 N DOUGLAS

City

ARLINGTON HTS

State

IL

Zip Code

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 ▼

269.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199162

Amount of Each Receipt this Period

30.26

B.

Full Name (Last, First, Middle Initial)

ROBERT E TRANSON

Mailing Address 2644 N DOUGLAS

City

ARLINGTON HTS

State

IL

Zip Code

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 ▼

300.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199599

Amount of Each Receipt this Period

30.26

C.

Full Name (Last, First, Middle Initial)

MELINDA S TUNNER

Mailing Address 5430 TALL OAKS DRIVE

City

LONG GROVE

State

IL

Zip Code

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 ▼

443.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199297

Amount of Each Receipt this Period

50.18

SUBTOTAL of Receipts This Page (optional)

110.70

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 151 / 181

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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)
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 ▼

494.08

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199734

Amount of Each Receipt this Period

50.18

B.

Full Name (Last, First, Middle Initial)
WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199169

Amount of Each Receipt this Period

57.72

C.

Full Name (Last, First, Middle Initial)
WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199606

Amount of Each Receipt this Period

57.72

SUBTOTAL of Receipts This Page (optional)

165.62

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 152 / 181

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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)

JOHN W VAN ETEN

Mailing Address 924 W. Gordon Terrace #3

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Process Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199221

Amount of Each Receipt this Period

18.96

B.

Full Name (Last, First, Middle Initial)

JOHN W VAN ETEN

Mailing Address 924 W. Gordon Terrace #3

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Process Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.66

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199658

Amount of Each Receipt this Period

29.16

C.

Full Name (Last, First, Middle Initial)

WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City

VERNON HILLS

State

IL

Zip Code

60061

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 ▼

295.95

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199108

Amount of Each Receipt this Period

33.03

SUBTOTAL of Receipts This Page (optional)

81.15

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 153 / 181

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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)

WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City

VERNON HILLS

State

IL

Zip Code

60061

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 ▼

328.98

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199545

Amount of Each Receipt this Period

33.03

B.

Full Name (Last, First, Middle Initial)

PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199330

Amount of Each Receipt this Period

63.47

C.

Full Name (Last, First, Middle Initial)

PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199767

Amount of Each Receipt this Period

63.47

SUBTOTAL of Receipts This Page (optional)

159.97

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 / 181

(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)

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:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	0

Transaction ID: A2010-1199099

Amount of Each Receipt this Period

40.56

B.

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:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	1	0

Transaction ID: A2010-1199536

Amount of Each Receipt this Period

40.56

C.

Full Name (Last, First, Middle Initial)

STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City

WADSWORTH

State

IL

Zip Code

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 ▼

701.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	0

Transaction ID: A2010-1198997

Amount of Each Receipt this Period

76.15

SUBTOTAL of Receipts This Page (optional)

157.27

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 155 / 181

(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 VERNEY

Mailing Address 37144 FOX HILL DR

City

WADSWORTH

State

IL

Zip Code

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 ▼

777.63

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199435

Amount of Each Receipt this Period

76.15

B.

Full Name (Last, First, Middle Initial)

JOAN H WALKER

Mailing Address 850 N. Riverwoods Road

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-Corporate Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.84

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199370

Amount of Each Receipt this Period

51.92

C.

Full Name (Last, First, Middle Initial)

JOAN H WALKER

Mailing Address 850 N. Riverwoods Road

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-Corporate Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.76

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199807

Amount of Each Receipt this Period

51.92

SUBTOTAL of Receipts This Page (optional)

179.99

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 156 / 181

(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)

MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City

CLOVIS

State

CA

Zip Code

93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.67

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199077

Amount of Each Receipt this Period

28.79

B.

Full Name (Last, First, Middle Initial)

MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City

CLOVIS

State

CA

Zip Code

93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.46

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199514

Amount of Each Receipt this Period

28.79

C.

Full Name (Last, First, Middle Initial)

ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City

PONTE VEDRA

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Credit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.94

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199061

Amount of Each Receipt this Period

64.62

SUBTOTAL of Receipts This Page (optional)

122.20

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 181

(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

PONTE VEDRA

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP-Credit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199498

Amount of Each Receipt this Period

64.62

B.

Full Name (Last, First, Middle Initial)

THOMAS M WARDEN

Mailing Address 770 Bair Island Road #200

City

Redwood City

State

CA

Zip Code

94063

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 ▼

320.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	0

Transaction ID: A2010-1199072

Amount of Each Receipt this Period

36.25

C.

Full Name (Last, First, Middle Initial)

THOMAS M WARDEN

Mailing Address 770 Bair Island Road #200

City

Redwood City

State

CA

Zip Code

94063

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 ▼

356.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

Transaction ID: A2010-1199509

Amount of Each Receipt this Period

36.25

SUBTOTAL of Receipts This Page (optional)

137.12

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 158 / 181

(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)

EDWIN L WASINGER JR, Jr.

Mailing Address 6245 MURIFIELD DRIVE

City

GURNEE

State

IL

Zip Code

60031

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 ▼

341.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199243

Amount of Each Receipt this Period

38.32

B.

Full Name (Last, First, Middle Initial)

EDWIN L WASINGER JR, Jr.

Mailing Address 6245 MURIFIELD DRIVE

City

GURNEE

State

IL

Zip Code

60031

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 ▼

380.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199680

Amount of Each Receipt this Period

38.32

C.

Full Name (Last, First, Middle Initial)

Robert Wasserman

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

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 ▼

576.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199390

Amount of Each Receipt this Period

64.48

SUBTOTAL of Receipts This Page (optional)

141.12

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 159 / 181

(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 Wasserman

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

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 ▼

640.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199827

Amount of Each Receipt this Period

64.48

B.

Full Name (Last, First, Middle Initial)

JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City

LIBERTYVILLE

State

IL

Zip Code

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 ▼

302.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199321

Amount of Each Receipt this Period

34.00

C.

Full Name (Last, First, Middle Initial)

JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City

LIBERTYVILLE

State

IL

Zip Code

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 ▼

336.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199758

Amount of Each Receipt this Period

34.00

SUBTOTAL of Receipts This Page (optional)

132.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 160 / 181

(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 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

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 ▼

314.80

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199309

Amount of Each Receipt this Period

35.36

B.

Full Name (Last, First, Middle Initial)

SAMUEL W WHITEMAN

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

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 ▼

350.16

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199746

Amount of Each Receipt this Period

35.36

C.

Full Name (Last, First, Middle Initial)

CYNTHIA A WHITFIELD

Mailing Address 1818 N. Crenshaw Circle

City

Vernon Hills

State

IL

Zip Code

60061

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 ▼

210.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199438

Amount of Each Receipt this Period

21.27

SUBTOTAL of Receipts This Page (optional)

91.99

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 / 181

(check only one)

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

Allstate Insurance Company PAC

A.Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City	State	Zip Code
CRYSTAL LAKE	IL	60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	0

Transaction ID: A2010-1199052

Amount of Each Receipt this Period

39.77

B.Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City	State	Zip Code
CRYSTAL LAKE	IL	60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	1	0

Transaction ID: A2010-1199489

Amount of Each Receipt this Period

39.77

C.Full Name (Last, First, Middle Initial)
ROBERT N WHOLF

Mailing Address 847 INTERLAKEN DRIVE

City	State	Zip Code
LAKE ZURICH	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claims Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	1	0

Transaction ID: A2010-1199519

Amount of Each Receipt this Period

21.79

SUBTOTAL of Receipts This Page (optional)

101.33

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 / 181

(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)

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

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	0

Transaction ID: A2010-1199126

Amount of Each Receipt this Period

35.23

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

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	1	0

Transaction ID: A2010-1199563

Amount of Each Receipt this Period

35.23

C.

Full Name (Last, First, Middle Initial)

ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Chief Diversity Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.17

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	1	0

Transaction ID: A2010-1199336

Amount of Each Receipt this Period

48.13

SUBTOTAL of Receipts This Page (optional)

118.59

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 163 / 181

(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)

ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Chief Diversity Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199773

Amount of Each Receipt this Period

48.13

B.

Full Name (Last, First, Middle Initial)

JAMES L WILLCOX

Mailing Address 1562 Sienna Oak Court

City

Sandy

State

UT

Zip Code

84092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.15

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199054

Amount of Each Receipt this Period

23.43

C.

Full Name (Last, First, Middle Initial)

JAMES L WILLCOX

Mailing Address 1562 Sienna Oak Court

City

Sandy

State

UT

Zip Code

84092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.58

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199491

Amount of Each Receipt this Period

23.43

SUBTOTAL of Receipts This Page (optional)

94.99

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 164 / 181

(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)

JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City

CLARKSVILLE

State

MD

Zip Code

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 ▼

363.37

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199152

Amount of Each Receipt this Period

40.73

B.

Full Name (Last, First, Middle Initial)

JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City

CLARKSVILLE

State

MD

Zip Code

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 ▼

404.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199589

Amount of Each Receipt this Period

40.73

C.

Full Name (Last, First, Middle Initial)

THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2247.73

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199268

Amount of Each Receipt this Period

253.85

SUBTOTAL of Receipts This Page (optional)

335.31

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 181

(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)

THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2501.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199705

Amount of Each Receipt this Period

253.85

B.

Full Name (Last, First, Middle Initial)

BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199668

Amount of Each Receipt this Period

20.68

C.

Full Name (Last, First, Middle Initial)

ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

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 ▼

291.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199310

Amount of Each Receipt this Period

33.11

SUBTOTAL of Receipts This Page (optional)

307.64

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 166 / 181

(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)

ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

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 ▼

324.82

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199747

Amount of Each Receipt this Period

33.11

B.

Full Name (Last, First, Middle Initial)

MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City

HAWTHORN WOODS

State

IL

Zip Code

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 ▼

300.87

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1198999

Amount of Each Receipt this Period

33.43

C.

Full Name (Last, First, Middle Initial)

MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City

HAWTHORN WOODS

State

IL

Zip Code

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 ▼

334.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199437

Amount of Each Receipt this Period

33.43

SUBTOTAL of Receipts This Page (optional)

99.97

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 167 / 181

(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)

DONALD F WYATT JR, Jr.

Mailing Address 811 DRESSER DR.

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199129

Amount of Each Receipt this Period

36.98

B.

Full Name (Last, First, Middle Initial)

DONALD F WYATT JR, Jr.

Mailing Address 811 DRESSER DR.

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

367.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199566

Amount of Each Receipt this Period

36.98

C.

Full Name (Last, First, Middle Initial)

FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City

PARK RIDGE

State

IL

Zip Code

60068

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 ▼

489.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199195

Amount of Each Receipt this Period

55.54

SUBTOTAL of Receipts This Page (optional)

129.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 168 / 181

(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)

FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City

PARK RIDGE

State

IL

Zip Code

60068

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 ▼

544.84

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199632

Amount of Each Receipt this Period

55.54

B.

Full Name (Last, First, Middle Initial)

LORI J YELVINGTON

Mailing Address 1531 N HIGHLAND AVE

City

ARLINGTON HGTS.

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.16

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199202

Amount of Each Receipt this Period

56.20

C.

Full Name (Last, First, Middle Initial)

LORI J YELVINGTON

Mailing Address 1531 N HIGHLAND AVE

City

ARLINGTON HGTS.

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.36

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199639

Amount of Each Receipt this Period

56.20

SUBTOTAL of Receipts This Page (optional)

167.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 169 / 181

(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 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
AVP-Product Pricing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.61

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199130

Amount of Each Receipt this Period

43.65

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
AVP-Product Pricing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199567

Amount of Each Receipt this Period

43.65

C.

Full Name (Last, First, Middle Initial)
CYNTHIA H YOUNG

Mailing Address 1861 N. Sawgrass Street

City State Zip Code
Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Ivantage/Independent A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

989.13

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199367

Amount of Each Receipt this Period

110.53

SUBTOTAL of Receipts This Page (optional)

197.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 170 / 181

(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 H YOUNG

Mailing Address 1861 N. Sawgrass Street

City State Zip Code
Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Ivantage/Independent A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1099.66

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199804

Amount of Each Receipt this Period

110.53

B.

Full Name (Last, First, Middle Initial)
MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City State Zip Code
ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199192

Amount of Each Receipt this Period

37.42

C.

Full Name (Last, First, Middle Initial)
MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City State Zip Code
ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.72

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199629

Amount of Each Receipt this Period

37.42

SUBTOTAL of Receipts This Page (optional)

185.37

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 171 / 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

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

Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Allstate Life Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.61

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199284

Amount of Each Receipt this Period

67.29

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 ▼

672.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199721

Amount of Each Receipt this Period

67.29

C.

Full Name (Last, First, Middle Initial)
GERALD L ZIMMERMAN JR, 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 ▼

354.43

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199276

Amount of Each Receipt this Period

40.23

SUBTOTAL of Receipts This Page (optional)

174.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 172 / 181

(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)

GERALD L ZIMMERMAN JR, Jr.

Mailing Address 2584 Sutton Lane

City

AURORA

State

IL

Zip Code

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 ▼

394.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199713

Amount of Each Receipt this Period

40.23

B.

Full Name (Last, First, Middle Initial)

JERRY D ZINKULA

Mailing Address 920 CEDAR LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199319

Amount of Each Receipt this Period

22.56

C.

Full Name (Last, First, Middle Initial)

JERRY D ZINKULA

Mailing Address 920 CEDAR LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.84

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199756

Amount of Each Receipt this Period

22.56

SUBTOTAL of Receipts This Page (optional)

85.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 173 / 181

(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)

CARLA D ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City

VERNON HILLS

State

IL

Zip Code

60061

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 ▼

213.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 1 0

Transaction ID: A2010-1199333

Amount of Each Receipt this Period

24.38

B.

Full Name (Last, First, Middle Initial)

CARLA D ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City

VERNON HILLS

State

IL

Zip Code

60061

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 ▼

237.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 1 0

Transaction ID: A2010-1199770

Amount of Each Receipt this Period

24.38

SUBTOTAL of Receipts This Page (optional)

48.76

TOTAL This Period (last page this line number only)

22392.05

**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 174 / 181

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement
May 2010 bank charge

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: IL

District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B330975

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	1	0

Amount of Each Disbursement this Period

103.40

B.

Full Name (Last, First, Middle Initial)

Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement
May 2010 bank charge

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: IL

District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B330976

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	0

Amount of Each Disbursement this Period

0.16

SUBTOTAL of Disbursements This Page (optional)

103.56

TOTAL This Period (last page this line number only)

103.56

**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 175 / 181

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Blanche Lincoln

Mailing Address 303 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
ContributionCandidate Name
Blanche L Lincoln011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District:

Transaction ID: B329285

Date of Disbursement

05 / 11 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Campbell for Congress

Mailing Address 700 12th Street NW Suite 700

City Washington State DC Zip Code 20005

Purpose of Disbursement
ContributionCandidate Name
John B Campbell, III011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 48

Transaction ID: B329891

Date of Disbursement

05 / 18 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Ed Royce for Congress

Mailing Address 217 Third Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
ContributionCandidate Name
Ed Royce011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 40

Transaction ID: B329886

Date of Disbursement

05 / 18 / 2010

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 176 / 181

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

Manzullo for Congress

Mailing Address PO Box 368

City
Falls ChurchState
VAZip Code
22040Purpose of Disbursement
ContributionCandidate Name
Donald Manzullo011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 16

Transaction ID: B329889

Date of Disbursement

05 / 18 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Nebraska Republican Party

Mailing Address 1610 N Street

City
LincolnState
NEZip Code
68508Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: NE District:

Not Applicable

Transaction ID: B327745

Date of Disbursement

05 / 28 / 2010

Amount of Each Disbursement this Period

-2500.00

Voided: Original check da-
ted 04/16/2010**C.**

Full Name (Last, First, Middle Initial)

Tiberi for Congress

Mailing Address 217 Third Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
ContributionCandidate Name
Pat Tiberi011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 12

Transaction ID: B329286

Date of Disbursement

05 / 11 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

-500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 177 / 181

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

Friends of John Thune

Mailing Address 912 F Street NW #1106

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
ContributionCandidate Name
John Thune011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District:

Transaction ID: B328784

Date of Disbursement

M M / D D / Y Y Y Y
0 5 / 0 4 / 2 0 1 0

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Friends of John Thune

Mailing Address 912 F Street NW #1106

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
ContributionCandidate Name
John Thune011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: SD District:

Transaction ID: B328852

Date of Disbursement

M M / D D / Y Y Y Y
0 5 / 0 4 / 2 0 1 0

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Financial Services Roundtable PAC

Mailing Address 1001 Pennsylvania Ave NW #500 S.

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: DC District:

Not Applicable

Transaction ID: B329289

Date of Disbursement

M M / D D / Y Y Y Y
0 5 / 1 1 / 2 0 1 0

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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 178 / 181

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

Every Republican Is Crucial (ERICPAC)

Mailing Address 209 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: VA

District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B329888

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

11000.00

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 179 / 181

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Blakeslee for Senate 2010 #1327078

Mailing Address 9321 Silver Bend Lane

City Elk Grove State CA Zip Code 95624

Purpose of Disbursement
O-2010 State Senate 15 CA

Candidate Name
Sam Blakeslee

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☐ General
☒ Other (specify) ▼
State: District: Special Primary

Transaction ID: B329791

Date of Disbursement

05 / 17 / 2010

Amount of Each Disbursement this Period

900.00

B. Full Name (Last, First, Middle Initial)
Hagman for Assembly ID# 1314493

Mailing Address 30151 Tomas

City Rancho Santo Marga State CA Zip Code 92688

Purpose of Disbursement
P-2010 State House 60 CA

Candidate Name
Curt Hagman

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: B330138

Date of Disbursement

05 / 21 / 2010

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Padilla for Senate ID#1292700

Mailing Address 1005 12th Street Suite H

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
P-2010 State Senate 20 CA

Candidate Name
Alex Padilla

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: B330139

Date of Disbursement

05 / 21 / 2010

Amount of Each Disbursement this Period

900.00

SUBTOTAL of Disbursements This Page (optional)

2300.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 180 / 181

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Chris Humphrey for NC Senate

Mailing Address PO Box 1478

City Kinston State NC Zip Code 28503

Purpose of Disbursement
O-2010 State Senate 10 NCCandidate Name
Chris Humphrey011
Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼
Debt Ret Primary
State: District:

Transaction ID: B329290

Date of Disbursement

05 / 11 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Tony Rand Committee

Mailing Address 2008 Litho Place

City Fayetteville State NC Zip Code 28304

Purpose of Disbursement
P-2010 State Senate 19 NCCandidate Name
Tony Rand011
Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: B299689

Date of Disbursement

05 / 28 / 2010

Amount of Each Disbursement this Period

-1000.00

Voided: Original check dated 12/29/2009

C. Full Name (Last, First, Middle Initial)
Friends of Jake Corman

Mailing Address P.O. Box 177

City Brockway State PA Zip Code 16823

Purpose of Disbursement
P-2010 State Senate 34 PACandidate Name
Jacob D Corman011
Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: B329020

Date of Disbursement

05 / 06 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 181 / 181

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Dominic Pileggi

Mailing Address 101 West Baltimore Ave. 2nd Flr

City State Zip Code
Media PA 19063

Purpose of Disbursement
G-2012 State Senate 09 PA

Candidate Name
Dominic F Pileggi

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: B329792

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

4300.00