

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

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

FOR LINE NUMBER: PAGE 10 OF 132

(check only one)

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

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

A. Ballinger, William, P., ,

Mailing Address 61 Tournament Dr N

City
Hawthorn Woods

State
IL

Zip Code
60047-8401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-PO-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : 202003169254-77

Amount of Each Receipt this Period

110.00

☐ Memo Item

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

B. Ballinger, William, P., ,

Mailing Address 61 Tournament Dr N

City
Hawthorn Woods

State
IL

Zip Code
60047-8401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-PO-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : 202003309135-78

Amount of Each Receipt this Period

110.00

☐ Memo Item

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

C. Banet, Phillip, W., ,

Mailing Address 1975 Merlot Ct

City
Wheeling

State
IL

Zip Code
60090-6755

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ENT-P&C Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

307.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : 202003169254-315

Amount of Each Receipt this Period

43.90

☐ Memo Item

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

263.90

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