

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Allstate Insurance Company PAC

ADDRESS (number and street)

3100 Sanders Road

Suite 201

☐ Check if different than previously reported. (ACC)

Northbrook

IL

60062-7155

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 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
Year-End 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Imbarrato, Mario, , ,

Signature of Treasurer

Imbarrato, Mario, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 08 / 01 / 2026 To: M M / D D / Y Y Y Y Y 08 / 31 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		155475.57
(b) Cash on Hand at Beginning of Reporting Period.....	166325.23	
(c) Total Receipts (from Line 19)	24598.19	221446.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	190923.42	376922.33
7. Total Disbursements (from Line 31)	8865.97	194864.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	182057.45	182057.45
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	2	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	22321.69	177954.47
(ii) Unitemized	2276.50	43492.29
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	24598.19	221446.76
(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)	24598.19	221446.76
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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 Transfers (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))	24598.19	221446.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24598.19	221446.76

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	365.97	3164.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	365.97	3164.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	180500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	8500.00	11200.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	8865.97	194864.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8865.97	194864.88

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	24598.19	221446.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24598.19	221446.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	365.97	3164.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	365.97	3164.88

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

FOR LINE NUMBER: PAGE 6 OF 58

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

A. Fernandez, David, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
State Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A68A75385DF6745309F7

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: \$30.00/Bi-Weekly

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

B. ADAMCZYK, VICTORIA, , ,

Mailing Address 7350 N Dobson Rd

City
ScottsdaleState
AZZip Code
85256-2710FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP, Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2846.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A8116CCC6C4DD4C3DAEC

Amount of Each Receipt this Period

336.00

☐ Memo Item

Payroll Deduction: \$168.00/Bi-Weekly

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

C. MATHES, THOMAS, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
State Product Manager Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1423.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A6CC695E788644352ADD

Amount of Each Receipt this Period

168.00

☐ Memo Item

Payroll Deduction: \$84.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

564.00

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

FOR LINE NUMBER: PAGE 7 OF 58

(check 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. LUMICAO, BENJAMIN, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Business Law Attorney Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1545.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A9FDCEC275D6C407488F**

Amount of Each Receipt this Period

182.46

☐ Memo Item

Payroll Deduction: \$91.23/Bi-Weekly

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

B. Gallery, Elizabeth, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
President, Allstate Dealer Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A83CA41AF4D6449E8BB6**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: \$50.00/Bi-Weekly

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

C. Koplovitz, Deborah, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP, Client Legal Services & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A4CDBA0BCEF1F4FC594F**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: \$30.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

342.46

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

FOR LINE NUMBER: PAGE 8 OF 58

(check 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. SMITH, CHARLES, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Business Law Attorney Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1605.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A57748CD939484740931**

Amount of Each Receipt this Period

189.50

☐ Memo Item

Payroll Deduction: \$94.75/Bi-Weekly

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

B. Auerbach, Benjamin, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Director of Product Modeling & Decisio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AD7F3C1D1E1254BA0B8E**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: \$50.00/Bi-Weekly

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

C. Hallgren, Gary, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP, President Arity

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AE0E2CD5082ED4CE6ABB**

Amount of Each Receipt this Period

336.00

☐ Memo Item

Payroll Deduction: \$168.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

625.50

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

FOR LINE NUMBER: PAGE 9 OF 58

(check 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. Delaney, Justinn, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Field Leadership Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : AB39D3FD72D99463DBBD

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

B. SAVAGE, AMANDA, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Licensing & Commissions Senior Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : ABA3F529AC9AF423B933

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

C. PANFIL, GERARD, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Director, Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1610.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A260894643394405F978

Amount of Each Receipt this Period

190.00

☐ Memo Item

Payroll Deduction: \$95.00/Bi-Weekly

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

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

330.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 58
(check 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. Marsey, David, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP, Digital & Media

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A8A078ADB605E4701AAC**

Amount of Each Receipt this Period

170.00

☐ Memo Item

Payroll Deduction: \$85.00/Bi-Weekly

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

B. Brady, Elizabeth, , ,

Mailing Address 444 W Lake St

City
ChicagoState
ILZip Code
60606-0010FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
EVP, Chief Marketing, Customer & Cor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3269.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A736AF431C9F34721864**

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

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

C. SPENCE, BRIAN, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1208.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AEB7EB1CADD394D71BCC**

Amount of Each Receipt this Period

140.00

☐ Memo Item

Payroll Deduction: \$70.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

694.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 58
(check 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. Jeevanjee, Zulfikar, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
EVP, Allstate Technology Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3251.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AAD1AFDAA84264360932**

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

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

B. McMahon, Allison, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
AC District Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A5731BF770FEB4ED3AE3**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

C. KLODZINSKI, STEVEN, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Product Management (Technical) Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A9BADBB28F9B544F290C**

Amount of Each Receipt this Period

28.86

☐ Memo Item

Payroll Deduction: \$14.43/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

483.46

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

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

FOR LINE NUMBER: PAGE 12 OF 58
(check 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. Bond, Edward, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Business Law Attorney Senior Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.25

Date of Receipt

08 / 21 / 2026

Transaction ID : A531B5E3B2BFC46548B9

Amount of Each Receipt this Period

106.50

☐ Memo Item

Payroll Deduction: \$53.25/Bi-Weekly

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

B. MUELLER, DAVID, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Business Law Attorney Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.55

Date of Receipt

08 / 21 / 2026

Transaction ID : ABF0625AC928E47568AF

Amount of Each Receipt this Period

32.30

☐ Memo Item

Payroll Deduction: \$16.15/Bi-Weekly

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

C. VanScoyoc, Lisa, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.38

Date of Receipt

08 / 21 / 2026

Transaction ID : AA83C7BDFFFC43A08ED

Amount of Each Receipt this Period

36.28

☐ Memo Item

Payroll Deduction: \$18.14/Bi-Weekly

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

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

175.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 58
(check 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. Tyner, Adam, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Director, Insurance Product Manageme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1462.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : ACDD9768683B54B919A4

Amount of Each Receipt this Period

172.00

☐ Memo Item

Payroll Deduction: \$86.00/Bi-Weekly

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

B. Braun, William, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Vice President, Operational Excellence

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : AE60E0D5BC01A4FD9A9A

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

C. MITCHELL, AMBER, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Business Law Attorney Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1423.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : AB0DF8B3B9B614841A25

Amount of Each Receipt this Period

168.00

☐ Memo Item

Payroll Deduction: \$84.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

410.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 58
(check 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. LEGEL, KENT, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Head of Sales & Change Implementatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A447008E4D42541A58AF

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

B. REHMER, PAUL, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Global HR Operations & Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A62EF80D6BAED4DCB9BE

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

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

C. THOMAS, SHANTELLE, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Data Science, Artificial Intelligence

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2710.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A7CB39E699A194B4F9B6

Amount of Each Receipt this Period

320.00

☐ Memo Item

Payroll Deduction: \$160.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

440.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 58
(check 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. Delaney, Scott, , ,

Mailing Address 3100 Sanders Rd. Ste. 201

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

President and CEO, Allstate Financial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A08AA8BC747CD450C884

Amount of Each Receipt this Period

150.00

☐ Memo Item

Payroll Deduction: \$75.00/Bi-Weekly

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

B. Phillips, Amy, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Director, Claims Field Leadership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1861.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A01C9BAD651FA4475ADC

Amount of Each Receipt this Period

220.00

☐ Memo Item

Payroll Deduction: \$110.00/Bi-Weekly

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

C. McDowell, Casey, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP, Category & Sourcing Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2302.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : AC43347D44E0B4A8B95B

Amount of Each Receipt this Period

272.00

☐ Memo Item

Payroll Deduction: \$136.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

642.00

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

FOR LINE NUMBER: PAGE 16 OF 58

(check 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. RAFFORD, RICHARD, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Marketing Program Management Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : ADD3256498C88499AAA4

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: \$30.00/Bi-Weekly

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

B. Hwang, Christina, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3260.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A0FC7D08F85C74F72B41

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

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

C. SOSNOFF, JEREMY, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
AC District Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : AB019B6E79F5E443A815

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

514.60

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

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

FOR LINE NUMBER: PAGE 17 OF 58
(check 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. MacInnis, David, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, AI Ratemaking

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AA62C3B4B06DE4C4E80A

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

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

B. MACK, DAJUAN, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Head of Sales & Change Implementatic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AC6714723C8424581902

Amount of Each Receipt this Period

120.00

☐ Memo Item

Payroll Deduction: \$60.00/Bi-Weekly

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

C. WASHBURN, JOSEPH, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Finance Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2846.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AA8A6EA0D3B044BE6A6C

Amount of Each Receipt this Period

336.00

☐ Memo Item

Payroll Deduction: \$168.00/Bi-Weekly

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

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

506.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 58
(check 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. Zagorski, Mary, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Director, Insurance Product Manageme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1023.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A705EA4871F4C42E8890

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

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

B. Dugenske, John, , ,

Mailing Address 444 W Lake St

City
ChicagoState
ILZip Code
60606-0010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Investment & Financial Products Execu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3269.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A10E7A7A3A9AC41F2B64

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

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

C. Bartee, Bryan, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Management Adjusting CSL Associate M

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A28969DD2490A4B778CA

Amount of Each Receipt this Period

200.00

☐ Memo Item

Payroll Deduction: \$100.00/Bi-Weekly

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

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

634.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 58
(check 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. Rask, Lawrence, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP, Arity Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A30BE7FB144304BE89E1**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

B. LOCONTE, RICHARD, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP, Government & Industry Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2936.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A0534141ED23F4A42B54**

Amount of Each Receipt this Period

367.00

☐ Memo Item

Payroll Deduction: \$183.50/Bi-Weekly

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

C. Hart, Jacqueline, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Distribution Design Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2030.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A79A4B8468E98489E8E7**

Amount of Each Receipt this Period

240.00

☐ Memo Item

Payroll Deduction: \$120.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

677.00

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

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

FOR LINE NUMBER: PAGE 20 OF 58
(check 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. Juozaitis, Thomas, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Product Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1423.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AE77854E837FF403FA7E

Amount of Each Receipt this Period

168.00

☐ Memo Item

Payroll Deduction: \$84.00/Bi-Weekly

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

B. CANNON, JESSICA, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AC District Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AA7D1A4ECE17F4015986

Amount of Each Receipt this Period

48.00

☐ Memo Item

Payroll Deduction: \$24.00/Bi-Weekly

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

C. JILLSON, LISA, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Marketing & Research Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

580.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A640DAE5E08AB438BBEE

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

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

286.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 58
(check 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. Knudsen-Miner, CHRISTINE, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
State Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A6065EC9C376640B7A02**

Amount of Each Receipt this Period

88.00

☐ Memo Item

Payroll Deduction: \$44.00/Bi-Weekly

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

B. METZGER, CHRISTINA, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP, Customer Experience

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2166.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A133B3D5F83CB47DA909**

Amount of Each Receipt this Period

256.00

☐ Memo Item

Payroll Deduction: \$128.00/Bi-Weekly

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

C. Brides, Philip, , ,

Mailing Address 444 W Lake St

City
ChicagoState
ILZip Code
60606-0010FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SMD, Multi-Asset Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3260.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A952091D1D4D84DB9ABA**

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

728.60

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

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

FOR LINE NUMBER: PAGE 22 OF 58
(check 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. Updike, Tysa, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Strategy & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A02D70E0656834B8E8EC

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: \$30.00/Bi-Weekly

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

B. Dougherty, Heather, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AFS Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1991.92

Date of Receipt

08 / 21 / 2026

Transaction ID : AFA5F1090A6D44002B03

Amount of Each Receipt this Period

201.92

☐ Memo Item

Payroll Deduction: \$100.96/Bi-Weekly

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

C. THOMAS, MICHAEL, , ,

Mailing Address 444 W Lake St

City
Chicago

State
IL

Zip Code
60606-0010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, Administration & Real Estate VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2629.50

Date of Receipt

08 / 21 / 2026

Transaction ID : ABFEE455B8FEE4582B0C

Amount of Each Receipt this Period

327.00

☐ Memo Item

Payroll Deduction: \$163.50/Bi-Weekly

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

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

588.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 58
(check 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. MARTIN, CLAIRE, , ,

Mailing Address 1055 Franklin Ave

City
Garden CityState
NYZip Code
11530-2903FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Lead Litigation Counsel, Client Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : ACB3C31BF80F049B18BC**

Amount of Each Receipt this Period

88.00

☐ Memo Item

Payroll Deduction: \$44.00/Bi-Weekly

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

B. DIERINGER, BRIAN, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP, President Allstate Roadside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AD090BECCF05444A88E**

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

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

C. Conner, Chris, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Government & Industry Relations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2035.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A901622CA63B74B07BBA**

Amount of Each Receipt this Period

270.00

☐ Memo Item

Payroll Deduction: \$135.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

438.00

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

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

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 (check 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. Gross, Byron, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AC District Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A59B5E8DC19EC4A65925

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

B. Ludwig, Jillian, , ,

Mailing Address 444 W Lake St

City
Chicago

State
IL

Zip Code
60606-0010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AC3EB49B0BE304C22808

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: \$30.00/Bi-Weekly

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

C. Van Arsdell, Jonathan, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Government & Industry Relati

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

990.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AA24A08C83B04425DB5A

Amount of Each Receipt this Period

150.00

☐ Memo Item

Payroll Deduction: \$75.00/Bi-Weekly

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

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

280.00

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

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

FOR LINE NUMBER: PAGE 25 OF 58
(check 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. DONOHO, SCOTT, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Go to Market General Manager Vice Pre

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

08 / 21 / 2026

Transaction ID : ACD119457259D47B4BAF

Amount of Each Receipt this Period

180.00

☐ Memo Item

Payroll Deduction: \$90.00/Bi-Weekly

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

B. Crabtree, Donald, LEE, ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AC Market Field Sales Associate Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A741037053F5D492FB98

Amount of Each Receipt this Period

170.00

☐ Memo Item

Payroll Deduction: \$85.00/Bi-Weekly

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

C. HEWITT, DAVID, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AC District Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AEFC8CA3867404F66832

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: \$30.00/Bi-Weekly

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

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

410.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 58
(check 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. Mejia, Heather, , ,Mailing Address 222 Merchandise Mart Plz
Ste 875City
ChicagoState
ILZip Code
60654-1070FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP, Internal Audit & Chief Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1423.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A9DE66423AA04401EB3E

Amount of Each Receipt this Period

168.00

☐ Memo Item

Payroll Deduction: \$84.00/Bi-Weekly

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

B. LUNDAHL, CAROL, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP, Corporate Treasury, Financial Plan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A5360D36A20064EE5809

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: \$20.00/Bi-Weekly

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

C. MORAN, MICHAEL, , ,

Mailing Address 444 W Lake St

City
ChicagoState
ILZip Code
60606-0010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
MD, Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : A0D702B607945434C8E8

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

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

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

288.00

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

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

FOR LINE NUMBER: PAGE 27 OF 58
 (check 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. Fowle, Erin, , ,

Mailing Address 1703 W Houstonia Ave

City
Royal Oak

State
MI

Zip Code
48073-3979

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Senior Managing Counsel, Government

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

789.43

Date of Receipt

08 / 21 / 2026

Transaction ID : ADDDA27E9B61749CE844

Amount of Each Receipt this Period

86.54

☐ Memo Item

Payroll Deduction: \$43.27/Bi-Weekly

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

B. Cook, Aaron, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Assistant General Counsel -

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.25

Date of Receipt

08 / 21 / 2026

Transaction ID : A32D5FD2B34A04C6A9DF

Amount of Each Receipt this Period

106.50

☐ Memo Item

Payroll Deduction: \$53.25/Bi-Weekly

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

C. Cook, Abril, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Management Support Associate Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A4DA5D4DB8BDD438BAD,

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: \$15.00/Bi-Weekly

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

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

223.04

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 58
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

A. Hedegard, Jon, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Government & Industry Relations Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : ABAB5102B0822474684A**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: \$15.00/Bi-Weekly

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

B. Celestine, Patrick, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Government & Industry Relations Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A5B694E2366ED41DB885**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: \$50.00/Bi-Weekly

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

C. DREXLER, PATRICIA, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2675.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A1D975C965DD94659B29**

Amount of Each Receipt this Period

270.00

☐ Memo Item

Payroll Deduction: \$135.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 58
(check 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. LUECHT, COREY, , ,

Mailing Address 444 W Lake St

City
ChicagoState
ILZip Code
60606-0010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Executive Compensation & Benefits Vic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1423.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A7867EED4B57441819F4**

Amount of Each Receipt this Period

168.00

☐ Memo Item

Payroll Deduction: \$84.00/Bi-Weekly

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

B. Davis, Nathan, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
State Manager Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A5676BD9A8C794B17A99**

Amount of Each Receipt this Period

86.54

☐ Memo Item

Payroll Deduction: \$43.27/Bi-Weekly

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

C. BOWN, GWEN, , ,

Mailing Address 151 North 8Th Street

City
LincolnState
NEZip Code
68508-1314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Director, Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2026**Transaction ID : A7AE87FE8D92B4804B1C**

Amount of Each Receipt this Period

17.50

☐ Memo Item

Payroll Deduction: \$17.50/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

272.04

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

Use separate schedule(s)
for each category of the
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(check 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. ROPER, GARY, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Client Legal Services Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AD9359A868A804C3CB64

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

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

B. IMBARRATO, MARIANO, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP, Treasury Planning & Corporate D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1406.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A4890DAB151DC46AFB02

Amount of Each Receipt this Period

166.00

☐ Memo Item

Payroll Deduction: \$83.00/Bi-Weekly

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

C. RHOADES, MELISSA, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Line Management Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AD9A1FC7000414E42A8A

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: \$15.00/Bi-Weekly

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

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

246.00

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

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

FOR LINE NUMBER: PAGE 31 OF 58

(check 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. OCONNOR, MICHAEL, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Agency Marketing Program M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.71

Date of Receipt

08 / 21 / 2026

Transaction ID : A5151B0D00EE64DB7958

Amount of Each Receipt this Period

33.26

☐ Memo Item

Payroll Deduction: \$16.63/Bi-Weekly

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

B. LEE, ROBERT, , ,

Mailing Address 3100 Sanders Rd. Ste. 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Field Leadership Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.32

Date of Receipt

08 / 07 / 2026

Transaction ID : A3E653BC058DC428E892

Amount of Each Receipt this Period

48.27

☐ Memo Item

Payroll Deduction: \$48.27/Bi-Weekly

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

C. Macellaro, Patrick, , ,

Mailing Address 222 Merchandise Mart Plz
Ste 875

City
Chicago

State
IL

Zip Code
60654-1070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, Claims Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A68547FFAB8CB48BEB73

Amount of Each Receipt this Period

130.00

☐ Memo Item

Payroll Deduction: \$65.00/Bi-Weekly

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

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

211.53

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

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

FOR LINE NUMBER: PAGE 32 OF 58
(check 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. Harris, Cheryl, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Sourcing & Procurement Senior Vice Pr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3260.30

Date of Receipt

08 / 21 / 2026

Transaction ID : ACE427FEB757C4AEE955

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

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

B. TARANDA, RICHARD, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
President AFI Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A34FD4436621C4231A0E

Amount of Each Receipt this Period

130.00

☐ Memo Item

Payroll Deduction: \$65.00/Bi-Weekly

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

C. Merten, Jesse, , ,

Mailing Address 444 W Lake St

City
Chicago

State
IL

Zip Code
60606-0010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
EVP, President Property Liability

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3269.27

Date of Receipt

08 / 21 / 2026

Transaction ID : AD482EA14E3134218A79

Amount of Each Receipt this Period

384.62

☐ Memo Item

Payroll Deduction: \$192.31/Bi-Weekly

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

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

899.22

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

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

FOR LINE NUMBER: PAGE 33 OF 58
(check 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. Liu, Jocelyn, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, Chief Compliance Officer & Enterpr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A6B0CA8C1A9744BA79FC

Amount of Each Receipt this Period

120.00

☐ Memo Item

Payroll Deduction: \$60.00/Bi-Weekly

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

B. Young, Emily, , ,

Mailing Address 222 Merchandise Mart Plz
Ste 875

City
Chicago

State
IL

Zip Code
60654-1070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Vice President, Product Delivery Accel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2455.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A3FBE5FD8483049DE92B

Amount of Each Receipt this Period

290.00

☐ Memo Item

Payroll Deduction: \$145.00/Bi-Weekly

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

C. Barry, Sean, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, Talent Acquisition

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A3E88E7235404480E83B

Amount of Each Receipt this Period

170.00

☐ Memo Item

Payroll Deduction: \$85.00/Bi-Weekly

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

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

580.00

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

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

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(check 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. Collins, Constance, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Business Law Attorney Senior Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A087D094AFA974518A1A

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

B. WASHBURN, CATHERINE, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Strategy and Operations Director, Ivan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1423.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A247B561E185946B0B65

Amount of Each Receipt this Period

168.00

☐ Memo Item

Payroll Deduction: \$84.00/Bi-Weekly

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

C. Armstrong, Steven, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Chief Actuary Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3269.27

Date of Receipt

08 / 21 / 2026

Transaction ID : AB8646A57A3484EBFB0A

Amount of Each Receipt this Period

384.62

☐ Memo Item

Payroll Deduction: \$192.31/Bi-Weekly

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

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

622.62

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

FOR LINE NUMBER: PAGE 35 OF 58

(check 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. MARTIN, PETER, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Director, Claims Field Leadership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A79B266E1F74840CAB08**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

B. BORST, WILLIAM, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
President Ivantage Brokerage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1406.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AF4695DDA4A63471D8D7**

Amount of Each Receipt this Period

166.00

☐ Memo Item

Payroll Deduction: \$83.00/Bi-Weekly

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

C. Simmonds, Mark, , ,

Mailing Address 650 Davis St

City
San FranciscoState
CAZip Code
94111-1904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Senior Vice President, Product Deliver

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AFB60B2C23A64ACCA8C**

Amount of Each Receipt this Period

340.00

☐ Memo Item

Payroll Deduction: \$170.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

576.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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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. MYKETIAK, DON, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ACCOUNTING SENIOR MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.38

Date of Receipt

08 / 21 / 2026

Transaction ID : A7BB1936F6B244B4488E

Amount of Each Receipt this Period

32.28

☐ Memo Item

Payroll Deduction: \$16.14/Bi-Weekly

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

B. WINTER, KURT, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, Agent Marketing & Sponsorships

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AF4BB8ACD117948329B2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

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

C. Huebbers, Jeffrey, , ,

Mailing Address 650 Davis St

City
San Francisco

State
CA

Zip Code
94111-1904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Agency Innovation Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A30BAB40E777343CEA3C

Amount of Each Receipt this Period

180.00

☐ Memo Item

Payroll Deduction: \$90.00/Bi-Weekly

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

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

262.28

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

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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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. WEIKEL, LEAH, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AC District Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.25

Date of Receipt

08 / 21 / 2026

Transaction ID : A8F8D3ED716DB468EBCD

Amount of Each Receipt this Period

96.50

☐ Memo Item

Payroll Deduction: \$48.25/Bi-Weekly

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

B. Rendall, Peter, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Go to Market General Manager Executi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1144.50

Date of Receipt

08 / 21 / 2026

Transaction ID : A4480C0EE50C343F880E

Amount of Each Receipt this Period

327.00

☐ Memo Item

Payroll Deduction: \$163.50/Bi-Weekly

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

C. Cleere, Brittany, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AC District Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1877.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A72177D2EB2094AECB68

Amount of Each Receipt this Period

222.00

☐ Memo Item

Payroll Deduction: \$111.00/Bi-Weekly

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

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

645.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 58
(check 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. Natarajan, Kamal, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Transformative Growth & Personal Line

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AF3BBCE2A99C14F48930**

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

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

B. PATTERSON, LAWRENCE, , ,

Mailing Address 400/444 North Capital Street Nw

City
WashingtonState
DCZip Code
20001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Top Expert, Government & Industry Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2030.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A5544BC41A3FA4390A5D**

Amount of Each Receipt this Period

240.00

☐ Memo Item

Payroll Deduction: \$120.00/Bi-Weekly

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

C. NELSON, MARY, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Head of Sales & Change Implementation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3260.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A8A5EE89EEC39400A850**

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

704.60

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

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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. Hirzalla, Basil, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Senior Vice President, Design & Digita

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2030.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AF24AB3DFB6C740C6907

Amount of Each Receipt this Period

240.00

☐ Memo Item

Payroll Deduction: \$120.00/Bi-Weekly

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

B. Pierce, Richard, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
IA Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AAB75FB20015D460CB04

Amount of Each Receipt this Period

300.00

☐ Memo Item

Payroll Deduction: \$150.00/Bi-Weekly

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

C. Hawkes, Troy, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
EVP - Allstate Agent Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2846.00

Date of Receipt

08 / 21 / 2026

Transaction ID : ADA894331662549B793C

Amount of Each Receipt this Period

336.00

☐ Memo Item

Payroll Deduction: \$168.00/Bi-Weekly

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

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

876.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 58
(check 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. Arvetis, Nicholas, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ALLIE Business Architect Senior Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A74C5CAB951AB4684A20**

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

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

B. VANDERMAUSE, BRENT, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A9313DD930CE747E39AB**

Amount of Each Receipt this Period

180.00

☐ Memo Item

Payroll Deduction: \$90.00/Bi-Weekly

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

C. Yeray, Amber, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Director, Customer Acquisition Analyti

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A8D33AE58C04E4E22937**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

310.00

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

Use separate schedule(s)
for each category of the
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 (check 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. MATTINGLY, DANIEL, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AC District Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AF9AE0ddb23394B0DA5C

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

B. Scott, Corinne, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Agency Support Design & Del

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.12

Date of Receipt

08 / 21 / 2026

Transaction ID : A9752511EFFF2489BA9F

Amount of Each Receipt this Period

32.72

☐ Memo Item

Payroll Deduction: \$16.36/Bi-Weekly

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

C. SCHECHT, KAREN, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, Claims Delivery

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

595.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A9712EAA6A7774868B0F

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

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

172.72

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

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

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(check 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. TOSCANO, HAROLD, , ,

Mailing Address 3100 Sanders Rd. Ste. 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, Client Legal Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1728.00

Date of Receipt

08 / 07 / 2026

Transaction ID : A18371869D97541C1A6F

Amount of Each Receipt this Period

108.00

☐ Memo Item

Payroll Deduction: \$108.00/Bi-Weekly

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

B. KANE, CHRISTOPHER, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Management Support Associate Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AD4C7FB54360F4024BB9

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: \$30.00/Bi-Weekly

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

C. Greiling, Amandah, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, Allstate Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AC6E453F2BCA54A9CA16

Amount of Each Receipt this Period

120.00

☐ Memo Item

Payroll Deduction: \$60.00/Bi-Weekly

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

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

288.00

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

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

FOR LINE NUMBER: PAGE 43 OF 58
(check 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. SMITH, DELLARESE, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Casualty East (Rep/Lit)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A610B5834780341A9956

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

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

B. BAKER, FRED, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Platform Consultant Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AC01027B92D974530958

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction: \$10.00/Bi-Weekly

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

C. Gallagher, Patrick, , ,

Mailing Address 3100 Sanders Rd. Ste. 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
IA Field Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1035.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A8798688064D24426804

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: \$20.00/Bi-Weekly

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

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

140.00

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

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

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(check 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. PRINDIVILLE, MARK, , ,

Mailing Address 444 W Lake St

City
Chicago

State
IL

Zip Code
60606-0010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
EVP, Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3269.10

Date of Receipt

08 / 21 / 2026

Transaction ID : A5008A6F8CB0A4FA3BAE

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

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

B. Watson, Michael, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Vice President, Embedded Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A6DC4E1DE8CBE45B1834

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

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

C. Tye, Roger, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP, Direct Web & Mobile

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3269.27

Date of Receipt

08 / 21 / 2026

Transaction ID : AC450C2E2ED644156BE7

Amount of Each Receipt this Period

384.62

☐ Memo Item

Payroll Deduction: \$192.31/Bi-Weekly

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

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

849.22

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 45 OF 58
(check 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. BRADLEY, LONDON, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP, President Allstate Canada

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3269.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : AF81D691A406C4634A55

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

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

B. Pierce, Lisa, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Government & Industry Relations Atton

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : ABEC7CA13751E47C8BF4

Amount of Each Receipt this Period

54.00

☐ Memo Item

Payroll Deduction: \$27.00/Bi-Weekly

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

C. Micheli, John, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Deputy Chief Claims Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

616.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026

Transaction ID : AC15C6E8A69B748C29CE

Amount of Each Receipt this Period

74.28

☐ Memo Item

Payroll Deduction: \$37.14/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

512.88

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

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

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(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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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. Fox, Hilary, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Client Legal Services Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1345.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A2C4ED7AB5F394BBD81F

Amount of Each Receipt this Period

180.00

☐ Memo Item

Payroll Deduction: \$90.00/Bi-Weekly

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

B. GRIFFIN, RANDOLPH, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Governance & Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

896.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A77AF2DD5BAE94DF7AC6

Amount of Each Receipt this Period

106.00

☐ Memo Item

Payroll Deduction: \$53.00/Bi-Weekly

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

C. RIZZO, MARIO, , ,

Mailing Address 444 W Lake St

City
Chicago

State
IL

Zip Code
60606-0010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Executive Vice President, Chief Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3269.10

Date of Receipt

08 / 21 / 2026

Transaction ID : A425C1CE6FC0E44E1A87

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Weekly

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

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

670.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 58
(check 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. HALPIN, MICHAEL, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A6BD57481A98740E293C**

Amount of Each Receipt this Period

180.00

☐ Memo Item

Payroll Deduction: \$90.00/Bi-Weekly

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

B. WILSON, THOMAS, , ,

Mailing Address 444 W Lake St

City
ChicagoState
ILZip Code
60606-0010FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Chair, President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4707.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A0539A26040C24A8DB2D**

Amount of Each Receipt this Period

553.84

☐ Memo Item

Payroll Deduction: \$276.92/Bi-Weekly

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

C. SEEBECK, RYAN, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Field Leadership Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A1361ABBAA70C4BF998E**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

803.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 48 OF 58
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

A. EDWARDS, SHARON, , ,

Mailing Address 444 W Lake St

City
ChicagoState
ILZip Code
60606-0010FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Director, Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1423.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A0FF7661BA07E40A6AFE**

Amount of Each Receipt this Period

168.00

☐ Memo Item

Payroll Deduction: \$84.00/Bi-Weekly

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

B. Ferguson, Tiffany, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP, Associate General Counsel, Labor,

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AC45EA3362F0E47FF9D2**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Payroll Deduction: \$100.00/Bi-Weekly

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

C. Fabrie, James, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Sr. Manager, IT System Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

346.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A03F28F9639D74B90A41**

Amount of Each Receipt this Period

86.54

☐ Memo Item

Payroll Deduction: \$43.27/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

454.54

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 OF 58
(check 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. STADJUCHAR, MARC, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CAT Response Lead Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A2C972B5A25B64453BDC

Amount of Each Receipt this Period

2.00

☐ Memo Item

Payroll Deduction: \$1.00/Bi-Weekly

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

B. Fendt, John, , ,

Mailing Address 120 White Plains Rd

City
Tarrytown

State
NY

Zip Code
10591-5526

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Client Legal Services Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A033B821AD8BD420C997

Amount of Each Receipt this Period

170.00

☐ Memo Item

Payroll Deduction: \$85.00/Bi-Weekly

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

C. CLARK, KELLY, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Business Law Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3269.27

Date of Receipt

08 / 21 / 2026

Transaction ID : AF3EE603675974A768BF

Amount of Each Receipt this Period

384.62

☐ Memo Item

Payroll Deduction: \$192.31/Bi-Weekly

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

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

556.62

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

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

FOR LINE NUMBER: PAGE 50 OF 58

(check 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. Woodward, Janelle, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SMD, Multi-Asset Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AF4D9C4C94C7A4C3FBB/

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: \$30.00/Bi-Weekly

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

B. ENGLISH, GREGORY, , ,

Mailing Address 3100 Sanders Rd
Ste 201

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Claims Field Leadership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

08 / 21 / 2026

Transaction ID : AB703C056DCBE4C4E9E9

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

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

C. Starry, Allyn, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Business Law Attorney Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A0DFCBF9FB8FC4E71B18

Amount of Each Receipt this Period

28.00

☐ Memo Item

Payroll Deduction: \$14.00/Bi-Weekly

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

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

158.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 51 OF 58
(check 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. Demetre, Michael, , ,

Mailing Address 222 Merchandise Mart Plz

City
ChicagoState
ILZip Code
60654-1103FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Go to Market General Manager Senior \

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3269.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A8D8742C0FE4143C5868**

Amount of Each Receipt this Period

384.62

☐ Memo Item

Payroll Deduction: \$192.31/Bi-Weekly

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

B. ZEMAN, ROBERT, , ,

Mailing Address 3100 Sanders Rd

City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Government & Industry Relations Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2846.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : AC92EB3149B7C40C9A21**

Amount of Each Receipt this Period

336.00

☐ Memo Item

Payroll Deduction: \$168.00/Bi-Weekly

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

C. TEAGUE, JOHN, , ,Mailing Address 3100 Sanders Rd
Ste 201City
NorthbrookState
ILZip Code
60062-7179FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Director, Claims Field Leadership

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2026**Transaction ID : A748B9BE9F7EB4618979**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

790.62

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

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

FOR LINE NUMBER: PAGE 52 OF 58
 (check 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. Tropea, Alicia, , ,

Mailing Address 222 Merchandise Mart Plz

City
Chicago

State
IL

Zip Code
60654-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
State Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

08 / 21 / 2026

Transaction ID : ADB68E630064C458D89F

Amount of Each Receipt this Period

12.00

☐ Memo Item

Payroll Deduction: \$12.00/Bi-Weekly

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

B. Respert, Arletra, , ,

Mailing Address 3100 Sanders Rd

City
Northbrook

State
IL

Zip Code
60062-7179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Director, Litigation Relationship

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

08 / 21 / 2026

Transaction ID : A6656263CF91B4A4884F

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

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

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

37.00

22321.69

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)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JP Morgan Chase Bank

Mailing Address 1111 Polaris Pkwy

City
Columbus

State
OH

Zip Code
43240-2031

Purpose of Disbursement

bank fees

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 17 / 2026

FEC Identification Number

C

Transaction ID : BE3944E409f

Amount of Each Disbursement this Period

365.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

365.97

365.97

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jared Carpenter for KY State Senate

Mailing Address P.O. Box 100

City
BereaState
KYZip Code
40403

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C Transaction ID : B9295FC9A9

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Clines for Kentucky State Representative

Mailing Address 5 Harvard Court

City
AlexandriaState
KYZip Code
41001-9281

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C Transaction ID : B79730C9132

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Steven Rudy for KY State Representative

Mailing Address 350 Peppers Mill Dr.

City
PaducahState
KYZip Code
42001

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C Transaction ID : B0A51DE5E

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Tony Hampton for KY State Representative

Mailing Address 407 General John Payne Blvd

City
GeorgetownState
KYZip Code
40324-9168

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : BE76B47AD5

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jason Howell for KY State Senate

Mailing Address 1321 Olive St

City
MurrayState
KYZip Code
42071-1828

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2028

☒	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : B528F5F6510

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David Osborne for State Representative

Mailing Address P.O. Box 219

City
ProspectState
KYZip Code
40059-0219

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : B5EAA650B1

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jared Bauman for KY State Representative

Mailing Address 5102 Hunters Point Circle

City
LouisvilleState
KYZip Code
40216-1486

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : BC53FB BBBB**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael Sarge Pollock for KY State Representative

Mailing Address 105 Colonial Dr.

City
CampbellsvilleState
KYZip Code
42718

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : B2E04E3FAE**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Adrielle Camuel for KY State Representative

Mailing Address 4413 Shagbark Ct

City
LexingtonState
KYZip Code
40515-1827

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : BA02BDD83**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Deanna Frazier Gordon for KY State Representative

Mailing Address P.O. Box 248

City
RichmondState
KYZip Code
40476-0248

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : B02BD9F746i

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Erika Hancock for KY State Representative

Mailing Address P.O. Box 4311

City
FrankfortState
KYZip Code
40604-4311

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : B22F764F794

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chad Aull for KY State Representative

Mailing Address 2112 Paige Court

City
LexingtonState
KYZip Code
40502

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : B0ECAB59Ei

Amount of Each Disbursement this Period

500.00

☐ Memo Item

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

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

1500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 58

☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Matt Lockett for KY State Representative

Mailing Address 901 Cannonball Drive

City
NicholasvilleState
KYZip Code
40356-3008

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : B202A93A3C

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Julie Raque Adams for KY State Senate

Mailing Address 213 South Lyndon Lane

City
LouisvilleState
KYZip Code
40222-5546

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : B0A032F52E1

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Meredith for KY State Representative

Mailing Address 464 Oakland Rd.

City
OaklandState
KYZip Code
42159

Purpose of Disbursement

Contribution to State Committee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : B625B9CD13

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

8500.00