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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Hagel for Nebraska

Mailing Address
c/o 1203 Porter Road
City: Alexandria State: VA Zip Code: 22314

Purpose of Disbursement
Fund-raiser

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: NE District:

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement
02 / 12 / 2002

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.10212

B.
Full Name (Last, First, Middle Initial)
Rely On Your Beliefs (ROYB) Fund

Mailing Address
1300 Pennsylvania Avenue, NW Suite 700
City: Washington State: DC Zip Code: 20004

Purpose of Disbursement
Fund-raiser, Multi-Candidate PAC

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
02 / 12 / 2002

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.10210

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

TOTAL This Period (last page this line number only) ..... ▶ **4500.00**