

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		44974.34
(b) Cash on Hand at Beginning of Reporting Period.....	44974.34	
(c) Total Receipts (from Line 19)	23133.10	23133.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	68107.44	68107.44
7. Total Disbursements (from Line 31).....	-2812.77	-2812.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	70920.21	70920.21
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: / / To: / /

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).....	1580.59	1580.59
(ii) Unitemized	21552.51	21552.51
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	23133.10	23133.10
(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)	23133.10	23133.10
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))..... ▶	23133.10	23133.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	23133.10	23133.10

DETAILED SUMMARY PAGE
of Disbursements

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	187.23	187.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	187.23	187.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-3000.00	-3000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	-2812.77	-2812.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-2812.77	-2812.77

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	23133.10	23133.10
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23133.10	23133.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	187.23	187.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	187.23	187.23

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

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

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Donald J Bailey
Full Name (Last, First, Middle Initial)
Mailing Address 27 Kitchell Road

City Morristown	State NJ	Zip Code 07960
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation President-Emerging Business	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

Date of Receipt
01 / 27 / 2012
Transaction ID : **A2012-131249**

Amount of Each Receipt this Period
115.38

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

City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation SVP & CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.92	

Date of Receipt
01 / 27 / 2012
Transaction ID : **A2012-130967**

Amount of Each Receipt this Period
188.46

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

City LINDENHURST	State IL	Zip Code 60046
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation VP-Agency Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
01 / 27 / 2012
Transaction ID : **A2012-130959**

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....▶	428.84
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

A. Richard J Law
Full Name (Last, First, Middle Initial)

Mailing Address 3 Jackson Manor Court

City Phoenix State MD Zip Code 21131

FEC ID number of contributing federal political committee. **C**

Name of Employer Allstate Insurance Company Occupation Vice President - Presiden

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.60

Date of Receipt 01 / 27 / 2012
Transaction ID : A2012-131242

Amount of Each Receipt this Period 121.30

B. Michele C Mayes
Full Name (Last, First, Middle Initial)

Mailing Address 1630 Chicago Avenue

City Evanston State IL Zip Code 60201

FEC ID number of contributing federal political committee. **C**

Name of Employer Allstate Insurance Company Occupation SVP & Chief Legal Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 01 / 27 / 2012
Transaction ID : A2012-131233

Amount of Each Receipt this Period 135.00

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

Mailing Address 22622 N. LINDEN DR

City LAKE BARRINGTON State IL Zip Code 60010

FEC ID number of contributing federal political committee. **C**

Name of Employer Allstate Insurance Company Occupation Vice President Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.12

Date of Receipt 01 / 27 / 2012
Transaction ID : A2012-131007

Amount of Each Receipt this Period 120.06

SUBTOTAL of Receipts This Page (optional)..... ▶ 376.36

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

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

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

FOR LINE NUMBER: PAGE 9 OF 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

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

Mailing Address 270 KINGSWAY DRIVE

City State Zip Code
 AURORA IL 60506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Allstate Insurance Company SVP-P-CCSO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 212.30

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 27 / 2012
Transaction ID : A2012-131066

Amount of Each Receipt this Period
 106.15

Full Name (Last, First, Middle Initial)
B. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City State Zip Code
 CHICAGO IL 60614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Allstate Insurance Company CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 253.85

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 13 / 2012
Transaction ID : A2012-130777

Amount of Each Receipt this Period
 253.85

Full Name (Last, First, Middle Initial)
C. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City State Zip Code
 CHICAGO IL 60614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Allstate Insurance Company CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 507.70

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 27 / 2012
Transaction ID : A2012-131145

Amount of Each Receipt this Period
 253.85

SUBTOTAL of Receipts This Page (optional)..... ▶ **613.85**

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

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

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

FOR LINE NUMBER: PAGE 10 OF 12
(check only one)

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

Full Name (Last, First, Middle Initial)
A. Matthew E Winter

Mailing Address 2775 Sanders Road Suite A5

City Northbrook State IL Zip Code 60062

FEC ID number of contributing federal political committee. **C**

Name of Employer Allstate Insurance Company Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **323.08**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 27 / 2012

Transaction ID : A2012-131254

Amount of Each Receipt this Period
161.54

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	161.54
TOTAL This Period (last page this line number only).....▶	1580.59

**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)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Davis for Congress

Mailing Address 499 S. Capitol St SW Ste 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name
Geoff Davis

Category/
Type

Office Sought: House
 Senate
 President
State: KY District: 04

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 12 / 2012

Transaction ID : B401266

Amount of Each Disbursement this Period

-500.00

Voided: Original check dated 12/12/2011

Full Name (Last, First, Middle Initial)

B. NJ Republican State Cmte. Federal Acct.

Mailing Address 150 West State Street Ste 230

City Trenton State NJ Zip Code 08608

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District:

Disbursement For: 2011
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 25 / 2012

Transaction ID : B398322

Amount of Each Disbursement this Period

-2500.00

Voided: Original check dated 11/03/2011

Full Name (Last, First, Middle Initial)

C. NJ Democratic State Cmte. Federal Acct.

Mailing Address 194-196 West State Street

City Trenton State NJ Zip Code 08608

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District:

Disbursement For: 2011
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 25 / 2012

Transaction ID : B398323

Amount of Each Disbursement this Period

-2500.00

Voided: Original check dated 11/03/2011

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

-5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. NJ Republican State Cmte. Federal Acct.

Mailing Address 150 West State Street Ste 230

City State Zip Code
Trenton NJ 08608

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: NJ District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

/ /

Transaction ID : B404008

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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