

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

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Allstate Insurance Company PAC

ADDRESS (number and street)

2775 Sanders Road Suite A5

☐Check if different
than previously
reported. (ACC)

Northbrook

IL

60062

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00040253

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

09

01

2010

through

09

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Steven C. Verney

Signature of Treasurer

Electronically Filed by Steven C. Verney

Date

10

18

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 276

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	37795.26
(b) Cash on Hand at Beginning of Reporting Period	27490.69	
(c) Total Receipts (from Line 19)	28329.52	265048.58
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	55820.21	302843.84
7. Total Disbursements (from Line 31)	24107.49	271131.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31712.72	31712.72
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 276

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	27114.43	178307.56
(ii) Unitemized	1215.09	82239.82
(iii) TOTAL (add Lines 11(a)(i) and (ii)	28329.52	260547.38
(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)	28329.52	260547.38
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	4500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	1.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	28329.52	265048.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28329.52	265048.58

DETAILED SUMMARY PAGE

of Disbursements

4 / 276

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	107.49	1061.12	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	107.49	1061.12	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14500.00	155750.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	9500.00	114320.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	24107.49	271131.12	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24107.49	271131.12	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 276

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)	28329.52	260547.38
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28329.52	260547.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	107.49	1061.12
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	107.49	1061.12

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

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

FOR LINE NUMBER: PAGE 6 / 276

(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

A.

Full Name (Last, First, Middle Initial)

REBECCA A ABEL

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465807

Amount of Each Receipt this Period

22.02

B.

Full Name (Last, First, Middle Initial)

REBECCA A ABEL

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617578

Amount of Each Receipt this Period

22.02

C.

Full Name (Last, First, Middle Initial)

ERNEST D ADAMS

Mailing Address P O Box 105

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465535

Amount of Each Receipt this Period

19.73

SUBTOTAL of Receipts This Page (optional)

63.77

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**

Transaction ID :

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

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

FOR LINE NUMBER: PAGE 8 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.Full Name (Last, First, Middle Initial)
ERNEST D ADAMS

Mailing Address P O Box 105

City	State	Zip Code
Grayslake	IL	60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617310

Amount of Each Receipt this Period

19.73

B.Full Name (Last, First, Middle Initial)
JONES G ADUKEH

Mailing Address 1226 RIDGEWOOD LANE

City	State	Zip Code
LAKE VILLA	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465738

Amount of Each Receipt this Period

33.36

C.Full Name (Last, First, Middle Initial)
JONES G ADUKEH

Mailing Address 1226 RIDGEWOOD LANE

City	State	Zip Code
LAKE VILLA	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617510

Amount of Each Receipt this Period

33.36

SUBTOTAL of Receipts This Page (optional)

86.45

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 276

(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

A.

Full Name (Last, First, Middle Initial)

LORAL ADUKEH

Mailing Address 1226 RIDGEWOOD LANE

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465794

Amount of Each Receipt this Period

34.66

B.

Full Name (Last, First, Middle Initial)

LORAL ADUKEH

Mailing Address 1226 RIDGEWOOD LANE

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617565

Amount of Each Receipt this Period

34.66

C.

Full Name (Last, First, Middle Initial)

MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City

COLLEYVILLE

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465707

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

85.67

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City

COLLEYVILLE

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.65

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617479

Amount of Each Receipt this Period

16.35

B.

Full Name (Last, First, Middle Initial)

ERIKA S AHERN

Mailing Address 16 Sea Winds Lane East

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465437

Amount of Each Receipt this Period

28.41

C.

Full Name (Last, First, Middle Initial)

ERIKA S AHERN

Mailing Address 16 Sea Winds Lane East

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.43

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617212

Amount of Each Receipt this Period

28.41

SUBTOTAL of Receipts This Page (optional)

73.17

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 11 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DAVID L ALLEN

Mailing Address 4372 Duckhorn Drive

City

Moon Township

State

PA

Zip Code

15108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465472

Amount of Each Receipt this Period

31.71

B.

Full Name (Last, First, Middle Initial)

DAVID L ALLEN

Mailing Address 4372 Duckhorn Drive

City

Moon Township

State

PA

Zip Code

15108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.21

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617247

Amount of Each Receipt this Period

31.71

C.

Full Name (Last, First, Middle Initial)

AMY M ALLMON

Mailing Address 4499 Meyers Ct

City

Castle Rock

State

CO

Zip Code

80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465720

Amount of Each Receipt this Period

25.20

SUBTOTAL of Receipts This Page (optional)

88.62

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 276

(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

A.

Full Name (Last, First, Middle Initial)

AMY M ALLMON

Mailing Address 4499 Meyers Ct

City

Castle Rock

State

CO

Zip Code

80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617492

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

JOHN M ANDERSON

Mailing Address 1432 S. 10TH ST.

City

ST. CHARLES

State

IL

Zip Code

60174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465708

Amount of Each Receipt this Period

15.81

C.

Full Name (Last, First, Middle Initial)

JOHN M ANDERSON

Mailing Address 1432 S. 10TH ST.

City

ST. CHARLES

State

IL

Zip Code

60174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.15

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617480

Amount of Each Receipt this Period

15.81

SUBTOTAL of Receipts This Page (optional)

56.82

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 276

(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

A.

Full Name (Last, First, Middle Initial)

WILLIAM H AYO

Mailing Address 1009 LAKE RIDGE DR.

City

SAFETY HARBOR

State

FL

Zip Code

34695

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465524

Amount of Each Receipt this Period

16.59

B.

Full Name (Last, First, Middle Initial)

WILLIAM H AYO

Mailing Address 1009 LAKE RIDGE DR.

City

SAFETY HARBOR

State

FL

Zip Code

34695

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617299

Amount of Each Receipt this Period

16.59

C.

Full Name (Last, First, Middle Initial)

JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City

GRAYS LAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP Enterprise Infrastruct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465426

Amount of Each Receipt this Period

78.78

SUBTOTAL of Receipts This Page (optional)

111.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City

GRAYS LAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP Enterprise Infrastruct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1478.98

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617201

Amount of Each Receipt this Period

78.78

B.

Full Name (Last, First, Middle Initial)

CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE N

City

JACKSONVILLE

State

FL

Zip Code

32224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.36

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465513

Amount of Each Receipt this Period

33.22

C.

Full Name (Last, First, Middle Initial)

CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE N

City

JACKSONVILLE

State

FL

Zip Code

32224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

628.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617288

Amount of Each Receipt this Period

33.22

SUBTOTAL of Receipts This Page (optional)

145.22

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 276

(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

A.

Full Name (Last, First, Middle Initial)
DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code
Scottsdale AZ 85255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.64

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465428

Amount of Each Receipt this Period

21.54

B.

Full Name (Last, First, Middle Initial)
DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code
Scottsdale AZ 85255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.18

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617203

Amount of Each Receipt this Period

21.54

C.

Full Name (Last, First, Middle Initial)
ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse Unit 508

City State Zip Code
Chicago IL 60626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.40

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465710

Amount of Each Receipt this Period

28.54

SUBTOTAL of Receipts This Page (optional)

71.62

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse Unit 508

City

Chicago

State

IL

Zip Code

60626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.94

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617482

Amount of Each Receipt this Period

28.54

B.

Full Name (Last, First, Middle Initial)

GREGORY P BALDWIN

Mailing Address 2 Saddle Ridge Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465700

Amount of Each Receipt this Period

39.16

C.

Full Name (Last, First, Middle Initial)

GREGORY P BALDWIN

Mailing Address 2 Saddle Ridge Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617472

Amount of Each Receipt this Period

39.16

SUBTOTAL of Receipts This Page (optional)

106.86

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 276

(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

A.

Full Name (Last, First, Middle Initial)

WILLIAM P BALLINGER

Mailing Address 25 Blue Heron Way

City

State

Zip Code

Skillman

NJ

08558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

FVP President New Jersey

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.22

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465489

Amount of Each Receipt this Period

35.87

B.

Full Name (Last, First, Middle Initial)

WILLIAM P BALLINGER

Mailing Address 25 Blue Heron Way

City

State

Zip Code

Skillman

NJ

08558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

FVP President New Jersey

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.09

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617264

Amount of Each Receipt this Period

35.87

C.

Full Name (Last, First, Middle Initial)

DARRYL L BALTIMORE

Mailing Address 259 MAY AVENUE

City

State

Zip Code

GLEN ELLYN

IL

60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Allstate Financial -

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

957.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465827

Amount of Each Receipt this Period

53.35

SUBTOTAL of Receipts This Page (optional)

125.09

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 18 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DARRYL L BALTIMORE

Mailing Address 259 MAY AVENUE

City State Zip Code
 GLEN ELLYN IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Allstate Financial -

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.49

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617598

Amount of Each Receipt this Period

53.35

B.

Full Name (Last, First, Middle Initial)

PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code
 HOFFMAN ESTATES IL 60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.16

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465541

Amount of Each Receipt this Period

35.46

C.

Full Name (Last, First, Middle Initial)

PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code
 HOFFMAN ESTATES IL 60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.62

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617316

Amount of Each Receipt this Period

35.46

SUBTOTAL of Receipts This Page (optional)

124.27

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 19 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

ROBERT H BARGE III, III

Mailing Address 2222 LOCH WAY

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1304.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465806

Amount of Each Receipt this Period

72.82

B.

Full Name (Last, First, Middle Initial)

ROBERT H BARGE III, III

Mailing Address 2222 LOCH WAY

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1377.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617577

Amount of Each Receipt this Period

72.82

C.

Full Name (Last, First, Middle Initial)

ROBERT K BECKER

Mailing Address 108 Sloan Road

City

West Chester

State

PA

Zip Code

19382

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465447

Amount of Each Receipt this Period

25.38

SUBTOTAL of Receipts This Page (optional)

171.02

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ROBERT K BECKER

Mailing Address 108 Sloan Road

City

West Chester

State

PA

Zip Code

19382

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.62

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617222

Amount of Each Receipt this Period

25.38

B.

Full Name (Last, First, Middle Initial)

CANDICE L BEINLICH

Mailing Address 1781 TUDOR LANE # 309

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465586

Amount of Each Receipt this Period

19.41

C.

Full Name (Last, First, Middle Initial)

CANDICE L BEINLICH

Mailing Address 1781 TUDOR LANE # 309

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.67

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617360

Amount of Each Receipt this Period

19.41

SUBTOTAL of Receipts This Page (optional)

64.20

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 21 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465590

Amount of Each Receipt this Period

27.57

B.

Full Name (Last, First, Middle Initial)

DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617364

Amount of Each Receipt this Period

27.57

C.

Full Name (Last, First, Middle Initial)

WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465663

Amount of Each Receipt this Period

33.01

SUBTOTAL of Receipts This Page (optional)

88.15

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 276

(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

A.

Full Name (Last, First, Middle Initial)

WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.87

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617436

Amount of Each Receipt this Period

33.01

B.

Full Name (Last, First, Middle Initial)

EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City

GLENCOE

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465464

Amount of Each Receipt this Period

40.40

C.

Full Name (Last, First, Middle Initial)

EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City

GLENCOE

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617239

Amount of Each Receipt this Period

40.40

SUBTOTAL of Receipts This Page (optional)

113.81

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 23 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

DAVID G BIEMILLER

Mailing Address 480 LEES LAKE RD

City

FAYETTEVILLE

State

GA

Zip Code

30214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Process Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465525

Amount of Each Receipt this Period

20.97

B.

Full Name (Last, First, Middle Initial)

DAVID G BIEMILLER

Mailing Address 480 LEES LAKE RD

City

FAYETTEVILLE

State

GA

Zip Code

30214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Process Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617300

Amount of Each Receipt this Period

20.97

C.

Full Name (Last, First, Middle Initial)

DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City

PONTE VEDRA BEA

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

President-Allstate Workpl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465740

Amount of Each Receipt this Period

40.54

SUBTOTAL of Receipts This Page (optional)

82.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City

PONTE VEDRA BEA

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

President-Allstate Workpl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.54

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617512

Amount of Each Receipt this Period

40.54

B.

Full Name (Last, First, Middle Initial)

ROBERT W BIRMAN

Mailing Address 7533 WHITLOCK PLACE

City

LINCOLN

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Customer Service Senior M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.86

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465667

Amount of Each Receipt this Period

16.75

C.

Full Name (Last, First, Middle Initial)

ROBERT W BIRMAN

Mailing Address 7533 WHITLOCK PLACE

City

LINCOLN

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Customer Service Senior M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.61

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617440

Amount of Each Receipt this Period

16.75

SUBTOTAL of Receipts This Page (optional)

74.04

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ROBERT L BLOCK

Mailing Address 398 Brookmont Lane

City

North Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465729

Amount of Each Receipt this Period

64.20

B.

Full Name (Last, First, Middle Initial)

ROBERT L BLOCK

Mailing Address 398 Brookmont Lane

City

North Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617501

Amount of Each Receipt this Period

64.20

C.

Full Name (Last, First, Middle Initial)

CAROL L BONOVIK

Mailing Address 6 N. MILLERS LANE

City

MT. PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465652

Amount of Each Receipt this Period

16.82

SUBTOTAL of Receipts This Page (optional)

145.22

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 26 / 276

(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

A.

Full Name (Last, First, Middle Initial)
CAROL L BONOVIK

Mailing Address 6 N. MILLERS LANE

City State Zip Code
MT. PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617425

Amount of Each Receipt this Period

16.82

B.

Full Name (Last, First, Middle Initial)
DOUGLAS L BORG

Mailing Address 2160 Red Setter Road

City State Zip Code
Rocklin CA 95765

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Financial Sales Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.94

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465804

Amount of Each Receipt this Period

32.83

C.

Full Name (Last, First, Middle Initial)
DOUGLAS L BORG

Mailing Address 2160 Red Setter Road

City State Zip Code
Rocklin CA 95765

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Financial Sales Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.77

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617575

Amount of Each Receipt this Period

32.83

SUBTOTAL of Receipts This Page (optional)

82.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 276

(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

A.

Full Name (Last, First, Middle Initial)
GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City State Zip Code
LINCOLN NE 68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.38

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465765

Amount of Each Receipt this Period

15.03

B.

Full Name (Last, First, Middle Initial)
GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City State Zip Code
LINCOLN NE 68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.41

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617537

Amount of Each Receipt this Period

15.03

C.

Full Name (Last, First, Middle Initial)
MICHAEL B BOYLE

Mailing Address 1063 CHERRY STREET

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Info Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1412.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465492

Amount of Each Receipt this Period

78.83

SUBTOTAL of Receipts This Page (optional)

108.89

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL B BOYLE

Mailing Address 1063 CHERRY STREET

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Info Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1491.61

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617267

Amount of Each Receipt this Period

78.83

B.

Full Name (Last, First, Middle Initial)

LONDON B BRADLEY

Mailing Address 2411 Grey Eagle Bay

City

woodbury

State

MN

Zip Code

55129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.62

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465774

Amount of Each Receipt this Period

31.93

C.

Full Name (Last, First, Middle Initial)

LONDON B BRADLEY

Mailing Address 2411 Grey Eagle Bay

City

woodbury

State

MN

Zip Code

55129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617546

Amount of Each Receipt this Period

31.93

SUBTOTAL of Receipts This Page (optional)

142.69

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 29 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City

IVANHOE

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Encompass Field Distr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465744

Amount of Each Receipt this Period

22.31

B.

Full Name (Last, First, Middle Initial)

KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City

IVANHOE

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Encompass Field Distr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.17

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617516

Amount of Each Receipt this Period

22.31

C.

Full Name (Last, First, Middle Initial)

JEFFREY P BRASK

Mailing Address 21285 S. BOSCHOME CIRCLE

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465613

Amount of Each Receipt this Period

20.48

SUBTOTAL of Receipts This Page (optional)

65.10

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JEFFREY P BRASK

Mailing Address 21285 S. BOSCHOME CIRCLE

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617387

Amount of Each Receipt this Period

20.48

B.

Full Name (Last, First, Middle Initial)

SHEILA M BREEDING

Mailing Address 35 FAIRMONT AVENUE

City

SOMERVILLE

State

NJ

Zip Code

08876

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.54

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465450

Amount of Each Receipt this Period

16.51

C.

Full Name (Last, First, Middle Initial)

SHEILA M BREEDING

Mailing Address 35 FAIRMONT AVENUE

City

SOMERVILLE

State

NJ

Zip Code

08876

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.05

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617225

Amount of Each Receipt this Period

16.51

SUBTOTAL of Receipts This Page (optional)

53.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 31 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465480

Amount of Each Receipt this Period

20.03

B.

Full Name (Last, First, Middle Initial)

DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.37

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617255

Amount of Each Receipt this Period

20.03

C.

Full Name (Last, First, Middle Initial)

SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465600

Amount of Each Receipt this Period

44.94

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 276

(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

A.

Full Name (Last, First, Middle Initial)
SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617374

Amount of Each Receipt this Period

44.94

B.

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

Mailing Address 399 Summit Dr.

City State Zip Code
Emerald Hills CA 94062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465570

Amount of Each Receipt this Period

20.68

C.

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

Mailing Address 399 Summit Dr.

City State Zip Code
Emerald Hills CA 94062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617344

Amount of Each Receipt this Period

20.68

SUBTOTAL of Receipts This Page (optional)

86.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 33 / 276

(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

A.

Full Name (Last, First, Middle Initial)

LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City

FRANKLIN

State

TN

Zip Code

37064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.40

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465505

Amount of Each Receipt this Period

36.96

B.

Full Name (Last, First, Middle Initial)

LORRIE K BROUSE

Mailing Address 223 POLK PLACE DRIVE

City

FRANKLIN

State

TN

Zip Code

37064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.36

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617280

Amount of Each Receipt this Period

36.96

C.

Full Name (Last, First, Middle Initial)

BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City

CHICAGO

State

IL

Zip Code

60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465550

Amount of Each Receipt this Period

20.38

SUBTOTAL of Receipts This Page (optional)

94.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 34 / 276

(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

A.

Full Name (Last, First, Middle Initial)

BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City

CHICAGO

State

IL

Zip Code

60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.22

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617324

Amount of Each Receipt this Period

20.38

B.

Full Name (Last, First, Middle Initial)

MICHAEL E BROWN

Mailing Address 3203 Long Blvd # 6

City

Nashville

State

TN

Zip Code

37203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field EB Sls Ldr-Small Bu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465465

Amount of Each Receipt this Period

18.93

C.

Full Name (Last, First, Middle Initial)

MICHAEL E BROWN

Mailing Address 3203 Long Blvd # 6

City

Nashville

State

TN

Zip Code

37203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field EB Sls Ldr-Small Bu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.95

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617240

Amount of Each Receipt this Period

18.93

SUBTOTAL of Receipts This Page (optional)

58.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 35 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465703

Amount of Each Receipt this Period

19.88

B.

Full Name (Last, First, Middle Initial)

PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617475

Amount of Each Receipt this Period

19.88

C.

Full Name (Last, First, Middle Initial)

CATHERINE S BRUNE

Mailing Address 190 SAVANNA CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3383.28

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465512

Amount of Each Receipt this Period

188.46

SUBTOTAL of Receipts This Page (optional)

228.22

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 36 / 276

(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

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.

Full Name (Last, First, Middle Initial)

CATHERINE S BRUNE

Mailing Address 190 SAVANNA CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3571.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617287

Amount of Each Receipt this Period

188.46

B.

Full Name (Last, First, Middle Initial)

ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

City

BERWYN

State

IL

Zip Code

60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465596

Amount of Each Receipt this Period

37.02

C.

Full Name (Last, First, Middle Initial)

ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

City

BERWYN

State

IL

Zip Code

60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617370

Amount of Each Receipt this Period

37.02

SUBTOTAL of Receipts This Page (optional)

262.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 37 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City

WINFIELD

State

IL

Zip Code

60190

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.12

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465692

Amount of Each Receipt this Period

14.80

B.

Full Name (Last, First, Middle Initial)

JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City

WINFIELD

State

IL

Zip Code

60190

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617464

Amount of Each Receipt this Period

14.80

C.

Full Name (Last, First, Middle Initial)

CHERI M BUCKLEY

Mailing Address 249 S. OLD CREEK RD

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.82

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465697

Amount of Each Receipt this Period

11.23

SUBTOTAL of Receipts This Page (optional)

40.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 38 / 276

(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

A.

Full Name (Last, First, Middle Initial)

CHERI M BUCKLEY

Mailing Address 249 S. OLD CREEK RD

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.05

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617469

Amount of Each Receipt this Period

11.23

B.

Full Name (Last, First, Middle Initial)

DAVID N BUGGS

Mailing Address 12234 85TH AVE

City

PLEASANT PR

State

WI

Zip Code

53158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.96

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465730

Amount of Each Receipt this Period

33.10

C.

Full Name (Last, First, Middle Initial)

DAVID N BUGGS

Mailing Address 12234 85TH AVE

City

PLEASANT PR

State

WI

Zip Code

53158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.06

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617502

Amount of Each Receipt this Period

33.10

SUBTOTAL of Receipts This Page (optional)

77.43

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 39 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MARK L BUKOWY

Mailing Address 1077 Devon Drive

City

Antioch

State

IL

Zip Code

60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.18

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465593

Amount of Each Receipt this Period

15.41

B.

Full Name (Last, First, Middle Initial)

MARK L BUKOWY

Mailing Address 1077 Devon Drive

City

Antioch

State

IL

Zip Code

60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.59

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617367

Amount of Each Receipt this Period

15.41

C.

Full Name (Last, First, Middle Initial)

JEFFREY E BURKE

Mailing Address 601 North Pines Trail

City

Parker

State

CO

Zip Code

80138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465833

Amount of Each Receipt this Period

43.25

SUBTOTAL of Receipts This Page (optional)

74.07

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 40 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JEFFREY E BURKE

Mailing Address 601 North Pines Trail

City

Parker

State

CO

Zip Code

80138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Sales Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617604

Amount of Each Receipt this Period

43.25

B.

Full Name (Last, First, Middle Initial)

TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.96

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465474

Amount of Each Receipt this Period

15.60

C.

Full Name (Last, First, Middle Initial)

TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.56

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617249

Amount of Each Receipt this Period

15.60

SUBTOTAL of Receipts This Page (optional)

74.45

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 41 / 276

(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

A.

Full Name (Last, First, Middle Initial)
GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465469

Amount of Each Receipt this Period

24.09

B.

Full Name (Last, First, Middle Initial)
GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.65

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617244

Amount of Each Receipt this Period

24.81

C.

Full Name (Last, First, Middle Initial)
CECILE A BUTLER

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1627.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465416

Amount of Each Receipt this Period

90.62

SUBTOTAL of Receipts This Page (optional)

139.52

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 42 / 276

(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

A.

Full Name (Last, First, Middle Initial)
CECILE A BUTLER

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
SPRING GROVE IL 60081

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1718.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617191

Amount of Each Receipt this Period

90.62

B.

Full Name (Last, First, Middle Initial)
ALICE M BYRNE

Mailing Address 4121 109TH STREET

City State Zip Code
PLEASANT PRAIRI WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1456.98

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465725

Amount of Each Receipt this Period

81.35

C.

Full Name (Last, First, Middle Initial)
ALICE M BYRNE

Mailing Address 4121 109TH STREET

City State Zip Code
PLEASANT PRAIRI WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.33

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617497

Amount of Each Receipt this Period

81.35

SUBTOTAL of Receipts This Page (optional)

253.32

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 43 / 276

(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

A.

Full Name (Last, First, Middle Initial)
RICHARD S CAIRNS

Mailing Address 2791 NE 9TH COURT

City State Zip Code
POMPAÑO BEACH FL 33062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.44

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465516

Amount of Each Receipt this Period

18.02

B.

Full Name (Last, First, Middle Initial)
RICHARD S CAIRNS

Mailing Address 2791 NE 9TH COURT

City State Zip Code
POMPAÑO BEACH FL 33062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.46

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617291

Amount of Each Receipt this Period

18.02

C.

Full Name (Last, First, Middle Initial)
IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.08

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465737

Amount of Each Receipt this Period

25.26

SUBTOTAL of Receipts This Page (optional)

61.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 44 / 276

(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

A.

Full Name (Last, First, Middle Initial)

IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617509

Amount of Each Receipt this Period

25.26

B.

Full Name (Last, First, Middle Initial)

VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Communication Senior Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465672

Amount of Each Receipt this Period

21.47

C.

Full Name (Last, First, Middle Initial)

VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Communication Senior Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617445

Amount of Each Receipt this Period

21.47

SUBTOTAL of Receipts This Page (optional)

68.20

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 45 / 276

(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

A.

Full Name (Last, First, Middle Initial)

SCOTT M CHRISTENSEN

Mailing Address 20713 LEXINGTON LANE

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465653

Amount of Each Receipt this Period

42.67

B.

Full Name (Last, First, Middle Initial)

SCOTT M CHRISTENSEN

Mailing Address 20713 LEXINGTON LANE

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

798.09

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617426

Amount of Each Receipt this Period

42.67

C.

Full Name (Last, First, Middle Initial)

BRIAN L CLARK

Mailing Address 257 Lake Circle

City

MADISON

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.06

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465743

Amount of Each Receipt this Period

16.13

SUBTOTAL of Receipts This Page (optional)

101.47

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 46 / 276

(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

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.

Full Name (Last, First, Middle Initial)

BRIAN L CLARK

Mailing Address 257 Lake Circle

City

MADISON

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.19

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617515

Amount of Each Receipt this Period

16.13

B.

Full Name (Last, First, Middle Initial)

EDWARD T CLARK

Mailing Address 2907 GLENARYE DR

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465681

Amount of Each Receipt this Period

26.19

C.

Full Name (Last, First, Middle Initial)

EDWARD T CLARK

Mailing Address 2907 GLENARYE DR

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.57

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617454

Amount of Each Receipt this Period

26.19

SUBTOTAL of Receipts This Page (optional)

68.51

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 47 / 276

(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

A.

Full Name (Last, First, Middle Initial)

CHRISTOPHER W CLAY

Mailing Address 8875 SILVERBERRY AVENUE

City

ELK GROVE

State

CA

Zip Code

95624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.49

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465830

Amount of Each Receipt this Period

31.30

B.

Full Name (Last, First, Middle Initial)

CHRISTOPHER W CLAY

Mailing Address 8875 SILVERBERRY AVENUE

City

ELK GROVE

State

CA

Zip Code

95624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617601

Amount of Each Receipt this Period

31.30

C.

Full Name (Last, First, Middle Initial)

MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City

WESTERN SPRINGS

State

IL

Zip Code

60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.67

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465543

Amount of Each Receipt this Period

36.92

SUBTOTAL of Receipts This Page (optional)

99.52

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 48 / 276

(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

A.

Full Name (Last, First, Middle Initial)
MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS IL 60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.59

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617318

Amount of Each Receipt this Period

36.92

B.

Full Name (Last, First, Middle Initial)
DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Marketing Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.68

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465679

Amount of Each Receipt this Period

30.38

C.

Full Name (Last, First, Middle Initial)
DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Marketing Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.06

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617452

Amount of Each Receipt this Period

30.38

SUBTOTAL of Receipts This Page (optional)

97.68

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 49 / 276

(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

A.

Full Name (Last, First, Middle Initial)

LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465638

Amount of Each Receipt this Period

34.69

B.

Full Name (Last, First, Middle Initial)

LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.83

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617411

Amount of Each Receipt this Period

34.69

C.

Full Name (Last, First, Middle Initial)

PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.90

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465641

Amount of Each Receipt this Period

21.97

SUBTOTAL of Receipts This Page (optional)

91.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 50 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.87

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617414

Amount of Each Receipt this Period

21.97

B.

Full Name (Last, First, Middle Initial)

EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

798.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465588

Amount of Each Receipt this Period

44.71

C.

Full Name (Last, First, Middle Initial)

EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.45

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617362

Amount of Each Receipt this Period

44.71

SUBTOTAL of Receipts This Page (optional)

111.39

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 51 / 276

(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

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.

Full Name (Last, First, Middle Initial)

LINDA J COLLORA

Mailing Address 15 AMITY COURT

City

WARWICK

State

NY

Zip Code

10990

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

290.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465446

Amount of Each Receipt this Period

16.50

B.

Full Name (Last, First, Middle Initial)

LINDA J COLLORA

Mailing Address 15 AMITY COURT

City

WARWICK

State

NY

Zip Code

10990

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

307.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617221

Amount of Each Receipt this Period

16.50

C.

Full Name (Last, First, Middle Initial)

LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

352.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465623

Amount of Each Receipt this Period

19.69

SUBTOTAL of Receipts This Page (optional)

52.69

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 52 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617397

Amount of Each Receipt this Period

19.69

B.

Full Name (Last, First, Middle Initial)

MICHAEL P COOGAN

Mailing Address 1609 SYRACUSE LN.

City

SCHAUMBURG

State

IL

Zip Code

60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465643

Amount of Each Receipt this Period

32.25

C.

Full Name (Last, First, Middle Initial)

MICHAEL P COOGAN

Mailing Address 1609 SYRACUSE LN.

City

SCHAUMBURG

State

IL

Zip Code

60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617416

Amount of Each Receipt this Period

32.25

SUBTOTAL of Receipts This Page (optional)

84.19

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 53 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ERROL CRAMER

Mailing Address 1111 SARANAC AVE.

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Life Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465645

Amount of Each Receipt this Period

17.59

B.

Full Name (Last, First, Middle Initial)

ERROL CRAMER

Mailing Address 1111 SARANAC AVE.

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Life Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.17

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617418

Amount of Each Receipt this Period

17.59

C.

Full Name (Last, First, Middle Initial)

BRUCE A CREGGER

Mailing Address 6 LEONARD STREET

City

CARVER

State

MA

Zip Code

02330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Personal Lines Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.86

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465487

Amount of Each Receipt this Period

15.45

SUBTOTAL of Receipts This Page (optional)

50.63

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 54 / 276

(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

A.

Full Name (Last, First, Middle Initial)

BRUCE A CREGGER

Mailing Address 6 LEONARD STREET

City

CARVER

State

MA

Zip Code

02330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Personal Lines Sr Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.31

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617262

Amount of Each Receipt this Period

15.45

B.

Full Name (Last, First, Middle Initial)

WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City

ARLINGTON HGTS.

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Deputy G

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1399.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465548

Amount of Each Receipt this Period

78.33

C.

Full Name (Last, First, Middle Initial)

WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City

ARLINGTON HGTS.

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Deputy G

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1477.67

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617322

Amount of Each Receipt this Period

78.33

SUBTOTAL of Receipts This Page (optional)

172.11

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 55 / 276

(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

A.

Full Name (Last, First, Middle Initial)

RICHARD C CRIST JR, Jr.

Mailing Address 905 Chalet Court

City

Colleyville

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President -Corp Ethn

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1295.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465475

Amount of Each Receipt this Period

72.26

B.

Full Name (Last, First, Middle Initial)

RICHARD C CRIST JR, Jr.

Mailing Address 905 Chalet Court

City

Colleyville

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President -Corp Ethn

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1367.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617250

Amount of Each Receipt this Period

72.26

C.

Full Name (Last, First, Middle Initial)

WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP PCCSO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

837.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465463

Amount of Each Receipt this Period

47.14

SUBTOTAL of Receipts This Page (optional)

191.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 56 / 276

(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

A.

Full Name (Last, First, Middle Initial)

WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

885.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617238

Amount of Each Receipt this Period

47.14

B.

Full Name (Last, First, Middle Initial)

ROBERT W DANIELS

Mailing Address 1020 Pleasant Street #1

City

Oak Park

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465501

Amount of Each Receipt this Period

37.05

C.

Full Name (Last, First, Middle Initial)

ROBERT W DANIELS

Mailing Address 1020 Pleasant Street #1

City

Oak Park

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.47

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617276

Amount of Each Receipt this Period

37.05

SUBTOTAL of Receipts This Page (optional)

121.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 57 / 276

(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

A.

Full Name (Last, First, Middle Initial)

RANDAL S DECOURSEY

Mailing Address 1954 Oakwood Dr

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.18

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465589

Amount of Each Receipt this Period

34.71

B.

Full Name (Last, First, Middle Initial)

RANDAL S DECOURSEY

Mailing Address 1954 Oakwood Dr

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

652.89

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617363

Amount of Each Receipt this Period

34.71

C.

Full Name (Last, First, Middle Initial)

STEVEN J DEGNAN-SCHMIDT

Mailing Address 1320 MULBERRY LN.

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465531

Amount of Each Receipt this Period

38.74

SUBTOTAL of Receipts This Page (optional)

108.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 58 / 276

(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

A.

Full Name (Last, First, Middle Initial)

STEVEN J DEGNAN-SCHMIDT

Mailing Address 1320 MULBERRY LN.

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617306

Amount of Each Receipt this Period

38.74

B.

Full Name (Last, First, Middle Initial)

JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Product Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465696

Amount of Each Receipt this Period

54.59

C.

Full Name (Last, First, Middle Initial)

JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Product Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1037.21

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617468

Amount of Each Receipt this Period

54.59

SUBTOTAL of Receipts This Page (optional)

147.92

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 59 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.64

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465670

Amount of Each Receipt this Period

21.08

B.

Full Name (Last, First, Middle Initial)

DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617443

Amount of Each Receipt this Period

21.08

C.

Full Name (Last, First, Middle Initial)

LORI A DESCH

Mailing Address 12923 Freemont Peak Lane

City

Humble

State

TX

Zip Code

77346

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465523

Amount of Each Receipt this Period

42.61

SUBTOTAL of Receipts This Page (optional)

84.77

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 60 / 276

(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

A.

Full Name (Last, First, Middle Initial)

LORI A DESCH

Mailing Address 12923 Freemont Peak Lane

City

Humble

State

TX

Zip Code

77346

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.23

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617298

Amount of Each Receipt this Period

42.61

B.

Full Name (Last, First, Middle Initial)

KRISTINE DIGIROLAMO

Mailing Address 10123 NORTH RIVER ROAD

City

BARRINGTON HILLS

State

IL

Zip Code

60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465726

Amount of Each Receipt this Period

18.23

C.

Full Name (Last, First, Middle Initial)

KRISTINE DIGIROLAMO

Mailing Address 10123 NORTH RIVER ROAD

City

BARRINGTON HILLS

State

IL

Zip Code

60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.97

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617498

Amount of Each Receipt this Period

18.23

SUBTOTAL of Receipts This Page (optional)

79.07

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 61 / 276

(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

A.

Full Name (Last, First, Middle Initial)
SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.68

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2010

Transaction ID: A2010-2465671

Amount of Each Receipt this Period

58.50

B.

Full Name (Last, First, Middle Initial)
SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.18

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: A2010-2617444

Amount of Each Receipt this Period

58.50

C.

Full Name (Last, First, Middle Initial)
BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
Lincolnwood IL 60712

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.04

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2010

Transaction ID: A2010-2465762

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

136.88

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 62 / 276

(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

A.

Full Name (Last, First, Middle Initial)
BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
Lincolnwood IL 60712

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617534

Amount of Each Receipt this Period

19.88

B.

Full Name (Last, First, Middle Initial)
PHILIP J DORN

Mailing Address 12 SAINT JOHN DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.44

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465789

Amount of Each Receipt this Period

20.28

C.

Full Name (Last, First, Middle Initial)
PHILIP J DORN

Mailing Address 12 SAINT JOHN DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617561

Amount of Each Receipt this Period

20.28

SUBTOTAL of Receipts This Page (optional)

60.44

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 63 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DANIEL C DRESSEL

Mailing Address 1706 ADLER LANE

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465478

Amount of Each Receipt this Period

20.18

B.

Full Name (Last, First, Middle Initial)

DANIEL C DRESSEL

Mailing Address 1706 ADLER LANE

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.22

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617253

Amount of Each Receipt this Period

20.18

C.

Full Name (Last, First, Middle Initial)

PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.44

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465566

Amount of Each Receipt this Period

28.32

SUBTOTAL of Receipts This Page (optional)

68.68

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 64 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.76

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617340

Amount of Each Receipt this Period

28.32

B.

Full Name (Last, First, Middle Initial)

SUSAN DUCHAK

Mailing Address 4815 HIGHLAND AVE.

City

DOWNERS GROVE

State

IL

Zip Code

60515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Communication Senior Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465819

Amount of Each Receipt this Period

13.08

C.

Full Name (Last, First, Middle Initial)

SUSAN DUCHAK

Mailing Address 4815 HIGHLAND AVE.

City

DOWNERS GROVE

State

IL

Zip Code

60515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Communication Senior Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617590

Amount of Each Receipt this Period

13.08

SUBTOTAL of Receipts This Page (optional)

54.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 65 / 276

(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

A.

Full Name (Last, First, Middle Initial)
DONALD L DUFF

Mailing Address 127 E. STREAMWOOD BLVD.

City State Zip Code
STREAMWOOD IL 60107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Line of Bus Sr Mgr-Small

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465563

Amount of Each Receipt this Period

23.35

B.

Full Name (Last, First, Middle Initial)
DONALD L DUFF

Mailing Address 127 E. STREAMWOOD BLVD.

City State Zip Code
STREAMWOOD IL 60107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Line of Bus Sr Mgr-Small

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.77

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617337

Amount of Each Receipt this Period

23.35

C.

Full Name (Last, First, Middle Initial)
TIMOTHY R DUGAN

Mailing Address 3220 SANDY LANE

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465779

Amount of Each Receipt this Period

32.55

SUBTOTAL of Receipts This Page (optional)

79.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 66 / 276

(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

A.

Full Name (Last, First, Middle Initial)
TIMOTHY R DUGAN

Mailing Address 3220 SANDY LANE

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.89

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617551

Amount of Each Receipt this Period

32.55

B.

Full Name (Last, First, Middle Initial)
MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City State Zip Code
ROSCOE IL 61073

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Allstate Financial Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465651

Amount of Each Receipt this Period

25.80

C.

Full Name (Last, First, Middle Initial)
MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City State Zip Code
ROSCOE IL 61073

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Allstate Financial Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.68

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617424

Amount of Each Receipt this Period

25.80

SUBTOTAL of Receipts This Page (optional)

84.15

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 67 / 276

(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

A.

Full Name (Last, First, Middle Initial)

LAURA DUNNE

Mailing Address 1810 BALMORAL AVE

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Encompass Finance & D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465656

Amount of Each Receipt this Period

23.42

B.

Full Name (Last, First, Middle Initial)

LAURA DUNNE

Mailing Address 1810 BALMORAL AVE

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Encompass Finance & D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617429

Amount of Each Receipt this Period

23.42

C.

Full Name (Last, First, Middle Initial)

DANIEL P DURBIN

Mailing Address 1311 SOUTH WALNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465677

Amount of Each Receipt this Period

30.27

SUBTOTAL of Receipts This Page (optional)

77.11

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 68 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DANIEL P DURBIN

Mailing Address 1311 SOUTH WALNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.57

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617450

Amount of Each Receipt this Period

30.27

B.

Full Name (Last, First, Middle Initial)

JEFFREY P DWYER

Mailing Address 44 CHAMPLAIN COURT

City

MANAHAWKIN

State

NJ

Zip Code

08050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465423

Amount of Each Receipt this Period

14.64

C.

Full Name (Last, First, Middle Initial)

JEFFREY P DWYER

Mailing Address 44 CHAMPLAIN COURT

City

MANAHAWKIN

State

NJ

Zip Code

08050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617198

Amount of Each Receipt this Period

14.64

SUBTOTAL of Receipts This Page (optional)

59.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 69 / 276

(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

A.

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

Mailing Address 1327 N Illinois Avenue

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465572

Amount of Each Receipt this Period

34.27

B.

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

Mailing Address 1327 N Illinois Avenue

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.77

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617346

Amount of Each Receipt this Period

34.27

C.

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

Mailing Address 3077 EAST LAKE RD

City State Zip Code
MCDONOUGH GA 30252

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465517

Amount of Each Receipt this Period

28.90

SUBTOTAL of Receipts This Page (optional)

97.44

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 70 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JAMES C EASON

Mailing Address 3077 EAST LAKE RD

City

MCDONOUGH

State

GA

Zip Code

30252

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617292

Amount of Each Receipt this Period

28.90

B.

Full Name (Last, First, Middle Initial)

SHEILA A ECKHOFF

Mailing Address 211 N ERIE ST

City

WHEATON

State

IL

Zip Code

60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465559

Amount of Each Receipt this Period

19.97

C.

Full Name (Last, First, Middle Initial)

SHEILA A ECKHOFF

Mailing Address 211 N ERIE ST

City

WHEATON

State

IL

Zip Code

60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.91

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617333

Amount of Each Receipt this Period

20.57

SUBTOTAL of Receipts This Page (optional)

69.44

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 71 / 276

(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

A.

Full Name (Last, First, Middle Initial)
ROBERT N EMMICH

Mailing Address 108 SADDLE CREEK COVE

City State Zip Code
CANTON MS 39046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465815

Amount of Each Receipt this Period

16.96

B.

Full Name (Last, First, Middle Initial)
ROBERT N EMMICH

Mailing Address 108 SADDLE CREEK COVE

City State Zip Code
CANTON MS 39046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617586

Amount of Each Receipt this Period

16.96

C.

Full Name (Last, First, Middle Initial)
LILLY ENG

Mailing Address 563 PEREGRINE DRIVE

City State Zip Code
PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.38

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465547

Amount of Each Receipt this Period

17.17

SUBTOTAL of Receipts This Page (optional)

51.09

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 72 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City

CHICAGO

State

IL

Zip Code

60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465685

Amount of Each Receipt this Period

38.64

B.

Full Name (Last, First, Middle Initial)

KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City

CHICAGO

State

IL

Zip Code

60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.12

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617458

Amount of Each Receipt this Period

38.64

C.

Full Name (Last, First, Middle Initial)

MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City

INVERNESS

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465429

Amount of Each Receipt this Period

53.75

SUBTOTAL of Receipts This Page (optional)

131.03

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 73 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City

INVERNESS

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1021.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617204

Amount of Each Receipt this Period

53.75

B.

Full Name (Last, First, Middle Initial)

RICHARD B ESPINOZA

Mailing Address 673 HASTINGS ROAD

City

WHEELING

State

IL

Zip Code

60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.22

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465607

Amount of Each Receipt this Period

33.03

C.

Full Name (Last, First, Middle Initial)

RICHARD B ESPINOZA

Mailing Address 673 HASTINGS ROAD

City

WHEELING

State

IL

Zip Code

60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617381

Amount of Each Receipt this Period

33.03

SUBTOTAL of Receipts This Page (optional)

119.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 276

(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

A.

Full Name (Last, First, Middle Initial)

THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.22

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465461

Amount of Each Receipt this Period

44.35

B.

Full Name (Last, First, Middle Initial)

THOMAS W EVANS

Mailing Address 1224 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.57

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617236

Amount of Each Receipt this Period

44.35

C.

Full Name (Last, First, Middle Initial)

KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City

KILDEER

State

IL

Zip Code

60049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.56

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465736

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

128.46

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 75 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KATHRYN L FABYAN

Mailing Address 21209 WEST YORKSHIRE DRIVE

City

KILDEER

State

IL

Zip Code

60049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617508

Amount of Each Receipt this Period

39.76

B.

Full Name (Last, First, Middle Initial)

CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465714

Amount of Each Receipt this Period

27.76

C.

Full Name (Last, First, Middle Initial)

CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617486

Amount of Each Receipt this Period

27.76

SUBTOTAL of Receipts This Page (optional)

95.28

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 76 / 276

(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

A.

Full Name (Last, First, Middle Initial)
STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465467

Amount of Each Receipt this Period

26.03

B.

Full Name (Last, First, Middle Initial)
STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.53

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617242

Amount of Each Receipt this Period

26.03

C.

Full Name (Last, First, Middle Initial)
LISA J FLANARY

Mailing Address 1007 Harris Road

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Distribution Channel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465722

Amount of Each Receipt this Period

34.53

SUBTOTAL of Receipts This Page (optional)

86.59

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 77 / 276

(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

A.

Full Name (Last, First, Middle Initial)

LISA J FLANARY

Mailing Address 1007 Harris Road

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Distribution Channel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

648.87

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617494

Amount of Each Receipt this Period

34.53

B.

Full Name (Last, First, Middle Initial)

AMY C FLOYD

Mailing Address 1025 BONITA DRIVE

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465521

Amount of Each Receipt this Period

20.18

C.

Full Name (Last, First, Middle Initial)

AMY C FLOYD

Mailing Address 1025 BONITA DRIVE

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.22

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617296

Amount of Each Receipt this Period

20.18

SUBTOTAL of Receipts This Page (optional)

74.89

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 78 / 276

(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

A.

Full Name (Last, First, Middle Initial)
KELLY F FOGARTY

Mailing Address 613 REX

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465599

Amount of Each Receipt this Period

41.11

B.

Full Name (Last, First, Middle Initial)
KELLY F FOGARTY

Mailing Address 613 REX

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

774.77

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617373

Amount of Each Receipt this Period

41.11

C.

Full Name (Last, First, Middle Initial)
ANGELA K FONTANA

Mailing Address 1280 WILD ROSE LANE

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465764

Amount of Each Receipt this Period

19.91

SUBTOTAL of Receipts This Page (optional)

102.13

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 79 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ANGELA K FONTANA

Mailing Address 1280 WILD ROSE LANE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.41

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617536

Amount of Each Receipt this Period

19.91

B.

Full Name (Last, First, Middle Initial)

ANNE M FRANCESCONI

Mailing Address 390 17th St. NW #5034

City

Atlanta

State

GA

Zip Code

30363

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465612

Amount of Each Receipt this Period

14.40

C.

Full Name (Last, First, Middle Initial)

ANNE M FRANCESCONI

Mailing Address 390 17th St. NW #5034

City

Atlanta

State

GA

Zip Code

30363

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617386

Amount of Each Receipt this Period

14.40

SUBTOTAL of Receipts This Page (optional)

48.71

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 80 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KARL A FRIEDMAN

Mailing Address 333 DUNLEER DRIVE

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465620

Amount of Each Receipt this Period

17.69

B.

Full Name (Last, First, Middle Initial)

KARL A FRIEDMAN

Mailing Address 333 DUNLEER DRIVE

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.11

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617394

Amount of Each Receipt this Period

17.69

C.

Full Name (Last, First, Middle Initial)

ANGELA FUSCO

Mailing Address 22255 MASHIE CT

City

IVANHOE

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465477

Amount of Each Receipt this Period

35.28

SUBTOTAL of Receipts This Page (optional)

70.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 81 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ANGELA FUSCO

Mailing Address 22255 MASHIE CT

City

IVANHOE

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617252

Amount of Each Receipt this Period

35.28

B.

Full Name (Last, First, Middle Initial)

VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City

DIX HILLS

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465424

Amount of Each Receipt this Period

26.87

C.

Full Name (Last, First, Middle Initial)

VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City

DIX HILLS

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.01

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617199

Amount of Each Receipt this Period

26.87

SUBTOTAL of Receipts This Page (optional)

89.02

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 82 / 276

(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

A.

Full Name (Last, First, Middle Initial)

VICTORIA H GAGE-BERNHEIMER

Mailing Address 471 Burnt Ember Lane

City

Buffalo Grove

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465751

Amount of Each Receipt this Period

15.88

B.

Full Name (Last, First, Middle Initial)

VICTORIA H GAGE-BERNHEIMER

Mailing Address 471 Burnt Ember Lane

City

Buffalo Grove

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617523

Amount of Each Receipt this Period

15.88

C.

Full Name (Last, First, Middle Initial)

ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Department Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465557

Amount of Each Receipt this Period

16.91

SUBTOTAL of Receipts This Page (optional)

48.67

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 83 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Department Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617331

Amount of Each Receipt this Period

16.91

B.

Full Name (Last, First, Middle Initial)

MARY C GARDNER

Mailing Address 4506 DEER TRAIL

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465471

Amount of Each Receipt this Period

12.01

C.

Full Name (Last, First, Middle Initial)

MARY C GARDNER

Mailing Address 4506 DEER TRAIL

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617246

Amount of Each Receipt this Period

12.01

SUBTOTAL of Receipts This Page (optional)

40.93

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 84 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOSEPH E GARNETT

Mailing Address 507 OLD WALNUT CIRCLE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465436

Amount of Each Receipt this Period

19.36

B.

Full Name (Last, First, Middle Initial)

JOSEPH E GARNETT

Mailing Address 507 OLD WALNUT CIRCLE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617211

Amount of Each Receipt this Period

19.36

C.

Full Name (Last, First, Middle Initial)

NICK GEORGAKOPOULOS

Mailing Address 1129 N Mitchell Ave

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Director FSS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465631

Amount of Each Receipt this Period

18.03

SUBTOTAL of Receipts This Page (optional)

56.75

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 85 / 276

(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

A.

Full Name (Last, First, Middle Initial)
NICK GEORGAKOPOULOS

Mailing Address 1129 N Mitchell Ave

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Director FSS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.45

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617404

Amount of Each Receipt this Period

18.03

B.

Full Name (Last, First, Middle Initial)
BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60169

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.68

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465766

Amount of Each Receipt this Period

31.76

C.

Full Name (Last, First, Middle Initial)
BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60169

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.44

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617538

Amount of Each Receipt this Period

31.76

SUBTOTAL of Receipts This Page (optional)

81.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 86 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOAN GILMORE

Mailing Address 656 S BUCKINGHAM CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.12

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465430

Amount of Each Receipt this Period

41.36

B.

Full Name (Last, First, Middle Initial)

JOAN GILMORE

Mailing Address 656 S BUCKINGHAM CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

779.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617205

Amount of Each Receipt this Period

41.36

C.

Full Name (Last, First, Middle Initial)

WILLIAM T GOFF

Mailing Address 124 FLEETS COVE ROAD

City

HUNTINGTON

State

NY

Zip Code

11743

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.68

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465431

Amount of Each Receipt this Period

18.36

SUBTOTAL of Receipts This Page (optional)

101.08

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 87 / 276

(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

A.

Full Name (Last, First, Middle Initial)

WILLIAM T GOFF

Mailing Address 124 FLEETS COVE ROAD

City

HUNTINGTON

State

NY

Zip Code

11743

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617206

Amount of Each Receipt this Period

18.36

B.

Full Name (Last, First, Middle Initial)

BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465575

Amount of Each Receipt this Period

20.68

C.

Full Name (Last, First, Middle Initial)

BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617349

Amount of Each Receipt this Period

20.68

SUBTOTAL of Receipts This Page (optional)

59.72

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 88 / 276

(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

A.

Full Name (Last, First, Middle Initial)

TODD S GOLDMAN

Mailing Address 910 S MICHIGAN AVE #1505

City

CHICAGO

State

IL

Zip Code

60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465454

Amount of Each Receipt this Period

19.40

B.

Full Name (Last, First, Middle Initial)

TODD S GOLDMAN

Mailing Address 910 S MICHIGAN AVE #1505

City

CHICAGO

State

IL

Zip Code

60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617229

Amount of Each Receipt this Period

19.40

C.

Full Name (Last, First, Middle Initial)

BRIAN D GORE

Mailing Address 834 Greenwood Dr

City

Lindenhurst

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465427

Amount of Each Receipt this Period

17.58

SUBTOTAL of Receipts This Page (optional)

56.38

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 89 / 276

(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

A.

Full Name (Last, First, Middle Initial)

BRIAN D GORE

Mailing Address 834 Greenwood Dr

City

Lindenhurst

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617202

Amount of Each Receipt this Period

17.58

B.

Full Name (Last, First, Middle Initial)

ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City

ARLINGTON HTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.10

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465809

Amount of Each Receipt this Period

33.95

C.

Full Name (Last, First, Middle Initial)

ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City

ARLINGTON HTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

643.05

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617580

Amount of Each Receipt this Period

33.95

SUBTOTAL of Receipts This Page (optional)

85.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 90 / 276

(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

A.

Full Name (Last, First, Middle Initial)

GEORGE F GRAWE

Mailing Address 18799 GUNN HIGHWAY

City

ODESSA

State

FL

Zip Code

33556

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465520

Amount of Each Receipt this Period

21.77

B.

Full Name (Last, First, Middle Initial)

GEORGE F GRAWE

Mailing Address 18799 GUNN HIGHWAY

City

ODESSA

State

FL

Zip Code

33556

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.27

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617295

Amount of Each Receipt this Period

21.77

C.

Full Name (Last, First, Middle Initial)

PAMELA P GRAY

Mailing Address 50 E. BELLEVUE PL. #2402

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465746

Amount of Each Receipt this Period

27.93

SUBTOTAL of Receipts This Page (optional)

71.47

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 91 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PAMELA P GRAY

Mailing Address 50 E. BELLEVUE PL. #2402

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.43

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617518

Amount of Each Receipt this Period

27.93

B.

Full Name (Last, First, Middle Initial)

KELLIE H GREEN

Mailing Address 247 CHESHIRE ROAD

City

HUDSON

State

OH

Zip Code

44236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465497

Amount of Each Receipt this Period

15.50

C.

Full Name (Last, First, Middle Initial)

KELLIE H GREEN

Mailing Address 247 CHESHIRE ROAD

City

HUDSON

State

OH

Zip Code

44236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617272

Amount of Each Receipt this Period

15.50

SUBTOTAL of Receipts This Page (optional)

58.93

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 92 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP & Chief Investment Of

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1037.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465538

Amount of Each Receipt this Period

58.85

B.

Full Name (Last, First, Middle Initial)

JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP & Chief Investment Of

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1096.19

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617313

Amount of Each Receipt this Period

58.85

C.

Full Name (Last, First, Middle Initial)

M'BA G GREGOIRE

Mailing Address 18702 35th Drive SE

City

Bothell

State

WA

Zip Code

98012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.98

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465814

Amount of Each Receipt this Period

13.35

SUBTOTAL of Receipts This Page (optional)

131.05

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 93 / 276

(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

A.

Full Name (Last, First, Middle Initial)

M'BA G GREGOIRE

Mailing Address 18702 35th Drive SE

City

Bothell

State

WA

Zip Code

98012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.33

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617585

Amount of Each Receipt this Period

13.35

B.

Full Name (Last, First, Middle Initial)

MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City

WESTBURY

State

NY

Zip Code

11590

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465449

Amount of Each Receipt this Period

16.88

C.

Full Name (Last, First, Middle Initial)

MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City

WESTBURY

State

NY

Zip Code

11590

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617224

Amount of Each Receipt this Period

16.88

SUBTOTAL of Receipts This Page (optional)

47.11

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 94 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ANN M GROSS

Mailing Address 91 STABLE WAY

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465440

Amount of Each Receipt this Period

25.40

B.

Full Name (Last, First, Middle Initial)

ANN M GROSS

Mailing Address 91 STABLE WAY

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617215

Amount of Each Receipt this Period

25.40

C.

Full Name (Last, First, Middle Initial)

Gerard T GROUZARD

Mailing Address 943 W CAROLYN DR

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Data Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465573

Amount of Each Receipt this Period

15.53

SUBTOTAL of Receipts This Page (optional)

66.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 95 / 276

(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

A.

Full Name (Last, First, Middle Initial)

Gerard T GROUZARD

Mailing Address 943 W CAROLYN DR

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Data Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.87

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617347

Amount of Each Receipt this Period

15.53

B.

Full Name (Last, First, Middle Initial)

GREGORY J GUIDOS

Mailing Address 417 Adams Avenue

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465712

Amount of Each Receipt this Period

26.50

C.

Full Name (Last, First, Middle Initial)

GREGORY J GUIDOS

Mailing Address 417 Adams Avenue

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617484

Amount of Each Receipt this Period

26.50

SUBTOTAL of Receipts This Page (optional)

68.53

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 96 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DANIEL L GUTHRIE

Mailing Address 18889 W. GLENHURST DR.

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465742

Amount of Each Receipt this Period

13.86

B.

Full Name (Last, First, Middle Initial)

DANIEL L GUTHRIE

Mailing Address 18889 W. GLENHURST DR.

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617514

Amount of Each Receipt this Period

13.86

C.

Full Name (Last, First, Middle Initial)

JOHN F HAAS

Mailing Address 6509 E. BETTY ELYSE LANE

City

SCOTTSDALE

State

AZ

Zip Code

85254

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465793

Amount of Each Receipt this Period

19.28

SUBTOTAL of Receipts This Page (optional)

47.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 97 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ROBERT F HAIR

Mailing Address 17 NORTH TRAIL

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Line of Busn Dir Auto-Sma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465810

Amount of Each Receipt this Period

26.91

B.

Full Name (Last, First, Middle Initial)

ROBERT F HAIR

Mailing Address 17 NORTH TRAIL

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Line of Busn Dir Auto-Sma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.69

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617581

Amount of Each Receipt this Period

26.91

C.

Full Name (Last, First, Middle Initial)

RICHARD H HALBERG

Mailing Address 300 Tanager Lane

City

Lindenhurst

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465808

Amount of Each Receipt this Period

32.45

SUBTOTAL of Receipts This Page (optional)

86.27

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 98 / 276

(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

A.

Full Name (Last, First, Middle Initial)

RICHARD H HALBERG

Mailing Address 300 Tanager Lane

City

Lindenhurst

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.95

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617579

Amount of Each Receipt this Period

32.45

B.

Full Name (Last, First, Middle Initial)

ROBERT HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS COURT

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465684

Amount of Each Receipt this Period

17.36

C.

Full Name (Last, First, Middle Initial)

ROBERT HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS COURT

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617457

Amount of Each Receipt this Period

17.36

SUBTOTAL of Receipts This Page (optional)

67.17

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 99 / 276

(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

A.

Full Name (Last, First, Middle Initial)
RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465775

Amount of Each Receipt this Period

36.41

B.

Full Name (Last, First, Middle Initial)
RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

686.19

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617547

Amount of Each Receipt this Period

36.41

C.

Full Name (Last, First, Middle Initial)
Jacqueline J Hart

Mailing Address 1431 W. Walton

City State Zip Code
Chicago IL 60622

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465835

Amount of Each Receipt this Period

14.69

SUBTOTAL of Receipts This Page (optional)

87.51

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 100 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

Jacqueline J Hart

Mailing Address 1431 W. Walton

City

Chicago

State

IL

Zip Code

60622

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617606

Amount of Each Receipt this Period

14.69

B.

Full Name (Last, First, Middle Initial)

KEITH A HAUSCHILDT

Mailing Address 636 ROSEDALE AVE

City

ROSELLE

State

IL

Zip Code

60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP AF Operations & Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465532

Amount of Each Receipt this Period

25.82

C.

Full Name (Last, First, Middle Initial)

KEITH A HAUSCHILDT

Mailing Address 636 ROSEDALE AVE

City

ROSELLE

State

IL

Zip Code

60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP AF Operations & Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617307

Amount of Each Receipt this Period

25.82

SUBTOTAL of Receipts This Page (optional)

66.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 101 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City

CASTLE ROCK

State

CO

Zip Code

80108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465457

Amount of Each Receipt this Period

15.49

B.

Full Name (Last, First, Middle Initial)

JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City

CASTLE ROCK

State

CO

Zip Code

80108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.27

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617232

Amount of Each Receipt this Period

15.49

C.

Full Name (Last, First, Middle Initial)

DANIEL J HEBEL

Mailing Address 29030 N Spoon Court

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1263.40

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465530

Amount of Each Receipt this Period

70.42

SUBTOTAL of Receipts This Page (optional)

101.40

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 102 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DANIEL J HEBEL

Mailing Address 29030 N Spoon Court

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.82

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617305

Amount of Each Receipt this Period

70.42

B.

Full Name (Last, First, Middle Initial)

JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465422

Amount of Each Receipt this Period

14.46

C.

Full Name (Last, First, Middle Initial)

JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617197

Amount of Each Receipt this Period

14.46

SUBTOTAL of Receipts This Page (optional)

99.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 103 / 276

(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

A.

Full Name (Last, First, Middle Initial)
EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City State Zip Code
BELLWOOD IL 60104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Qlty Comp & Edu Sr. Mgr-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465587

Amount of Each Receipt this Period

16.08

B.

Full Name (Last, First, Middle Initial)
EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City State Zip Code
BELLWOOD IL 60104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Qlty Comp & Edu Sr. Mgr-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.56

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617361

Amount of Each Receipt this Period

16.08

C.

Full Name (Last, First, Middle Initial)
RICHARD J HENEBERRY

Mailing Address 23 CLAYTON

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465552

Amount of Each Receipt this Period

25.39

SUBTOTAL of Receipts This Page (optional)

57.55

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 104 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.Full Name (Last, First, Middle Initial)
RICHARD J HENEBERRY

Mailing Address 23 CLAYTON

City	State	Zip Code
LAKE VILLA	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617326

Amount of Each Receipt this Period

25.39

B.Full Name (Last, First, Middle Initial)
ROBERT L HERRING

Mailing Address 4337 SPRUCE BOUGH DR

City	State	Zip Code
MARIETTA	GA	30062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Sales Consultant Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465739

Amount of Each Receipt this Period

33.70

C.Full Name (Last, First, Middle Initial)
ROBERT L HERRING

Mailing Address 4337 SPRUCE BOUGH DR

City	State	Zip Code
MARIETTA	GA	30062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Sales Consultant Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617511

Amount of Each Receipt this Period

33.70

SUBTOTAL of Receipts This Page (optional)

92.79

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 105 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

EDDIE H HILL

Mailing Address 8390 Burnt Chimney Road

City

Wirtz

State

VA

Zip Code

24184

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465490

Amount of Each Receipt this Period

15.63

B.

Full Name (Last, First, Middle Initial)

EDDIE H HILL

Mailing Address 8390 Burnt Chimney Road

City

Wirtz

State

VA

Zip Code

24184

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617265

Amount of Each Receipt this Period

15.63

C.

Full Name (Last, First, Middle Initial)

WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1846.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465499

Amount of Each Receipt this Period

103.27

SUBTOTAL of Receipts This Page (optional)

134.53

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 106 / 276

(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

A.

Full Name (Last, First, Middle Initial)

WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.09

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617274

Amount of Each Receipt this Period

103.27

B.

Full Name (Last, First, Middle Initial)

JANET E HILTON

Mailing Address 122 13TH ST

City

MANHATTAN BCH

State

CA

Zip Code

90266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465713

Amount of Each Receipt this Period

14.50

C.

Full Name (Last, First, Middle Initial)

JANET E HILTON

Mailing Address 122 13TH ST

City

MANHATTAN BCH

State

CA

Zip Code

90266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.38

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617485

Amount of Each Receipt this Period

14.50

SUBTOTAL of Receipts This Page (optional)

132.27

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 107 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PAULA M HODGES

Mailing Address 7310 S 34TH CT

City

LINCOLN

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Allstate Financial Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.76

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465785

Amount of Each Receipt this Period

29.56

B.

Full Name (Last, First, Middle Initial)

PAULA M HODGES

Mailing Address 7310 S 34TH CT

City

LINCOLN

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Allstate Financial Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617557

Amount of Each Receipt this Period

29.56

C.

Full Name (Last, First, Middle Initial)

SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.38

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465637

Amount of Each Receipt this Period

15.91

SUBTOTAL of Receipts This Page (optional)

75.03

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 108 / 276

(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

A.

Full Name (Last, First, Middle Initial)
SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.29

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617410

Amount of Each Receipt this Period

15.91

B.

Full Name (Last, First, Middle Initial)
LINDA M HONOUR

Mailing Address 1066 Griffith Rd.

City State Zip Code
Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Investment Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

826.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465821

Amount of Each Receipt this Period

46.14

C.

Full Name (Last, First, Middle Initial)
LINDA M HONOUR

Mailing Address 1066 Griffith Rd.

City State Zip Code
Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Investment Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617592

Amount of Each Receipt this Period

46.14

SUBTOTAL of Receipts This Page (optional)

108.19

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 109 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.Full Name (Last, First, Middle Initial)
MERRILD A HOOVER

Mailing Address 49 DORAL STREET

City	State	Zip Code
HURRICANE	WV	25526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Market Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465504

Amount of Each Receipt this Period

24.31

B.Full Name (Last, First, Middle Initial)
MERRILD A HOOVER

Mailing Address 49 DORAL STREET

City	State	Zip Code
HURRICANE	WV	25526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Market Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617279

Amount of Each Receipt this Period

24.31

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

Mailing Address 1101 S. State Street 1002

City	State	Zip Code
Chicago	IL	60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claims Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465545

Amount of Each Receipt this Period

32.31

SUBTOTAL of Receipts This Page (optional)

80.93

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 110 / 276

(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

A.

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

Mailing Address 1101 S. State Street 1002

City State Zip Code
Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.73

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: A2010-2617320

Amount of Each Receipt this Period

32.31

B.

Full Name (Last, First, Middle Initial)
MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.64

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2010

Transaction ID: A2010-2465733

Amount of Each Receipt this Period

20.08

C.

Full Name (Last, First, Middle Initial)
MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.72

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: A2010-2617505

Amount of Each Receipt this Period

20.08

SUBTOTAL of Receipts This Page (optional)

72.47

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 111 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465482

Amount of Each Receipt this Period

15.92

B.

Full Name (Last, First, Middle Initial)

MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.24

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617257

Amount of Each Receipt this Period

15.92

C.

Full Name (Last, First, Middle Initial)

STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

886.06

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465634

Amount of Each Receipt this Period

49.65

SUBTOTAL of Receipts This Page (optional)

81.49

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 112 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617407

Amount of Each Receipt this Period

49.65

B.

Full Name (Last, First, Middle Initial)

MARIANO A IMBARRATO

Mailing Address 10825 CHUCER DRIVE

City

WILLOW SPRINGS

State

IL

Zip Code

60480

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Actuary and Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465611

Amount of Each Receipt this Period

11.99

C.

Full Name (Last, First, Middle Initial)

MARIANO A IMBARRATO

Mailing Address 10825 CHUCER DRIVE

City

WILLOW SPRINGS

State

IL

Zip Code

60480

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Actuary and Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617385

Amount of Each Receipt this Period

11.99

SUBTOTAL of Receipts This Page (optional)

73.63

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 113 / 276

(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

A.

Full Name (Last, First, Middle Initial)

LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Sourcing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.18

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465591

Amount of Each Receipt this Period

30.15

B.

Full Name (Last, First, Middle Initial)

LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Sourcing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.33

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617365

Amount of Each Receipt this Period

30.15

C.

Full Name (Last, First, Middle Initial)

MICHAEL A JACKOWSKI

Mailing Address 3602 FRANKLIN CT.

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1459.44

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465576

Amount of Each Receipt this Period

81.08

SUBTOTAL of Receipts This Page (optional)

141.38

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 114 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL A JACKOWSKI

Mailing Address 3602 FRANKLIN CT.

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617350

Amount of Each Receipt this Period

81.08

B.

Full Name (Last, First, Middle Initial)

BOB A JACKSON

Mailing Address 226 Maison Court

City

Altamonte Springs

State

FL

Zip Code

32714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.56

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465782

Amount of Each Receipt this Period

22.04

C.

Full Name (Last, First, Middle Initial)

BOB A JACKSON

Mailing Address 226 Maison Court

City

Altamonte Springs

State

FL

Zip Code

32714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617554

Amount of Each Receipt this Period

22.04

SUBTOTAL of Receipts This Page (optional)

125.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 115 / 276

(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

A.

Full Name (Last, First, Middle Initial)

CRAIG A JAMES

Mailing Address 235 HEATHER AVE

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Allstate Financial Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.76

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465705

Amount of Each Receipt this Period

12.96

B.

Full Name (Last, First, Middle Initial)

CRAIG A JAMES

Mailing Address 235 HEATHER AVE

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Allstate Financial Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617477

Amount of Each Receipt this Period

12.96

C.

Full Name (Last, First, Middle Initial)

JAMES C JAMIESON

Mailing Address 25 BRUCE CIRCLE NORTH

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465568

Amount of Each Receipt this Period

34.51

SUBTOTAL of Receipts This Page (optional)

60.43

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 116 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

JAMES C JAMIESON

Mailing Address 25 BRUCE CIRCLE NORTH

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617342

Amount of Each Receipt this Period

34.51

B.

Full Name (Last, First, Middle Initial)

JOHN A KANE

Mailing Address 1 LONGLEY PLACE

City

HUNTINGTON STA

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465438

Amount of Each Receipt this Period

20.92

C.

Full Name (Last, First, Middle Initial)

JOHN A KANE

Mailing Address 1 LONGLEY PLACE

City

HUNTINGTON STA

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617213

Amount of Each Receipt this Period

20.92

SUBTOTAL of Receipts This Page (optional)

76.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 117 / 276

(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

A.

Full Name (Last, First, Middle Initial)
TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465724

Amount of Each Receipt this Period

16.78

B.

Full Name (Last, First, Middle Initial)
TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.82

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617496

Amount of Each Receipt this Period

16.78

C.

Full Name (Last, First, Middle Initial)
DAVID E KENNEY

Mailing Address 622 SEDGWICK DR.

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465661

Amount of Each Receipt this Period

39.75

SUBTOTAL of Receipts This Page (optional)

73.31

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 118 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DAVID E KENNEY

Mailing Address 622 SEDGWICK DR.

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617434

Amount of Each Receipt this Period

39.75

B.

Full Name (Last, First, Middle Initial)

CHRISTOPHER R KIAH

Mailing Address 1430 ROLLING LINKS DRIVE

City

ALPHARETTA

State

GA

Zip Code

30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.29

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465418

Amount of Each Receipt this Period

51.37

C.

Full Name (Last, First, Middle Initial)

CHRISTOPHER R KIAH

Mailing Address 1430 ROLLING LINKS DRIVE

City

ALPHARETTA

State

GA

Zip Code

30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1171.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617193

Amount of Each Receipt this Period

51.37

SUBTOTAL of Receipts This Page (optional)

142.49

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 119 / 276

(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

A.

Full Name (Last, First, Middle Initial)
CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

726.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465571

Amount of Each Receipt this Period

40.56

B.

Full Name (Last, First, Middle Initial)
CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617345

Amount of Each Receipt this Period

40.56

C.

Full Name (Last, First, Middle Initial)
PAUL N KIERIG

Mailing Address 200 OXFORD RD

City State Zip Code
Tower Lakes IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465616

Amount of Each Receipt this Period

25.80

SUBTOTAL of Receipts This Page (optional)

106.92

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 120 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PAUL N KIERIG

Mailing Address 200 OXFORD RD

City

Tower Lakes

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.64

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617390

Amount of Each Receipt this Period

25.80

B.

Full Name (Last, First, Middle Initial)

BARBARA L KILROY

Mailing Address 1036 VINEYARD DRIVE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465488

Amount of Each Receipt this Period

19.24

C.

Full Name (Last, First, Middle Initial)

BARBARA L KILROY

Mailing Address 1036 VINEYARD DRIVE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.24

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617263

Amount of Each Receipt this Period

19.24

SUBTOTAL of Receipts This Page (optional)

64.28

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 121 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ANNE I KIM

Mailing Address 1580 SHERMAN AVE # 201

City

EVANSTON

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.08

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465701

Amount of Each Receipt this Period

19.98

B.

Full Name (Last, First, Middle Initial)

ANNE I KIM

Mailing Address 1580 SHERMAN AVE # 201

City

EVANSTON

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.06

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617473

Amount of Each Receipt this Period

19.98

C.

Full Name (Last, First, Middle Initial)

JAMES P KING

Mailing Address 592 TURNER AVENUE

City

GLEN ELLYN

State

IL

Zip Code

60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

657.90

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465690

Amount of Each Receipt this Period

36.55

SUBTOTAL of Receipts This Page (optional)

76.51

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 122 / 276

(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

A.

Full Name (Last, First, Middle Initial)

Brian D Klemstein

Mailing Address 608 Haddon Circle

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465834

Amount of Each Receipt this Period

13.79

B.

Full Name (Last, First, Middle Initial)

Brian D Klemstein

Mailing Address 608 Haddon Circle

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.41

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617605

Amount of Each Receipt this Period

13.79

C.

Full Name (Last, First, Middle Initial)

STEVEN T KLODZINSKI

Mailing Address 18699 W. State Line Road

City

Antioch

State

IL

Zip Code

60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.03

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465650

Amount of Each Receipt this Period

12.23

SUBTOTAL of Receipts This Page (optional)

39.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 123 / 276

(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

A.

Full Name (Last, First, Middle Initial)

STEVEN T KLODZINSKI

Mailing Address 18699 W. State Line Road

City

Antioch

State

IL

Zip Code

60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.26

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617423

Amount of Each Receipt this Period

12.23

B.

Full Name (Last, First, Middle Initial)

TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City

LEBANON

State

PA

Zip Code

17042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465473

Amount of Each Receipt this Period

20.26

C.

Full Name (Last, First, Middle Initial)

TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City

LEBANON

State

PA

Zip Code

17042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.98

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617248

Amount of Each Receipt this Period

20.26

SUBTOTAL of Receipts This Page (optional)

52.75

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 124 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465772

Amount of Each Receipt this Period

32.77

B.

Full Name (Last, First, Middle Initial)

JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.19

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617544

Amount of Each Receipt this Period

32.77

C.

Full Name (Last, First, Middle Initial)

GARY L KOCHANKE

Mailing Address 743 CARDIGAN CT

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465578

Amount of Each Receipt this Period

32.70

SUBTOTAL of Receipts This Page (optional)

98.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 125 / 276

(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

A.

Full Name (Last, First, Middle Initial)

GARY L KOCHANER

Mailing Address 743 CARDIGAN CT

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617352

Amount of Each Receipt this Period

32.70

B.

Full Name (Last, First, Middle Initial)

DANIEL P KRAFT

Mailing Address 1884 S. WARBLER CT.

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.36

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465527

Amount of Each Receipt this Period

11.68

C.

Full Name (Last, First, Middle Initial)

DANIEL P KRAFT

Mailing Address 1884 S. WARBLER CT.

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617302

Amount of Each Receipt this Period

11.68

SUBTOTAL of Receipts This Page (optional)

56.06

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 126 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465574

Amount of Each Receipt this Period

41.36

B.

Full Name (Last, First, Middle Initial)

JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

779.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617348

Amount of Each Receipt this Period

41.36

C.

Full Name (Last, First, Middle Initial)

JAIKRISHNA KUCHIMANCHI

Mailing Address 1503 ALMADEN LN

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465689

Amount of Each Receipt this Period

31.52

SUBTOTAL of Receipts This Page (optional)

114.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 127 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JAIRISHNA KUCHIMANCHI

Mailing Address 1503 ALMADEN LN

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.40

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617462

Amount of Each Receipt this Period

31.52

B.

Full Name (Last, First, Middle Initial)

Joseph Lacher

Mailing Address 2775 Sanders Road Suite A5

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465842

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Joseph Lacher

Mailing Address 2775 Sanders Road Suite A5

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617611

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

331.52

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 128 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL A LAMONICA

Mailing Address 20580 HIGH RIDGE DR.

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1267.22

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465619

Amount of Each Receipt this Period

70.71

B.

Full Name (Last, First, Middle Initial)

MICHAEL A LAMONICA

Mailing Address 20580 HIGH RIDGE DR.

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1337.93

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617393

Amount of Each Receipt this Period

70.71

C.

Full Name (Last, First, Middle Initial)

Richard J Law

Mailing Address 3 Jackson Manor Court

City

Phoenix

State

MD

Zip Code

21131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President - Presiden

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2151.46

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465838

Amount of Each Receipt this Period

120.05

SUBTOTAL of Receipts This Page (optional)

261.47

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 129 / 276

(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

A.

Full Name (Last, First, Middle Initial)

Richard J Law

Mailing Address 3 Jackson Manor Court

City

Phoenix

State

MD

Zip Code

21131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President - Presiden

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2271.51

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617608

Amount of Each Receipt this Period

120.05

B.

Full Name (Last, First, Middle Initial)

DEBORAH G LAWRENCE

Mailing Address 910 S MICHIGAN AVE #1501

City

CHICAGO

State

IL

Zip Code

60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.64

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465546

Amount of Each Receipt this Period

20.08

C.

Full Name (Last, First, Middle Initial)

DEBORAH G LAWRENCE

Mailing Address 910 S MICHIGAN AVE #1501

City

CHICAGO

State

IL

Zip Code

60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617321

Amount of Each Receipt this Period

20.08

SUBTOTAL of Receipts This Page (optional)

160.21

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 130 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PHILLIP E LAWSON

Mailing Address 1190 Palmer AVENUE

City

WINTER PARK

State

FL

Zip Code

32789

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1432.40

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465778

Amount of Each Receipt this Period

79.96

B.

Full Name (Last, First, Middle Initial)

PHILLIP E LAWSON

Mailing Address 1190 Palmer AVENUE

City

WINTER PARK

State

FL

Zip Code

32789

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1512.36

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617550

Amount of Each Receipt this Period

79.96

C.

Full Name (Last, First, Middle Initial)

MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City

BELLEVUE

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465811

Amount of Each Receipt this Period

64.17

SUBTOTAL of Receipts This Page (optional)

224.09

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 131 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City

BELLEVUE

State

WA

Zip Code

98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1211.75

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617582

Amount of Each Receipt this Period

64.17

B.

Full Name (Last, First, Middle Initial)

DAVID M LEEDS

Mailing Address 815 KALAMAZOO CIRCLE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465419

Amount of Each Receipt this Period

12.37

C.

Full Name (Last, First, Middle Initial)

DAVID M LEEDS

Mailing Address 815 KALAMAZOO CIRCLE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.07

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617194

Amount of Each Receipt this Period

12.37

SUBTOTAL of Receipts This Page (optional)

88.91

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 132 / 276

(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

A.

Full Name (Last, First, Middle Initial)

SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Sec & Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.90

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465417

Amount of Each Receipt this Period

29.71

B.

Full Name (Last, First, Middle Initial)

SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Sec & Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.61

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617192

Amount of Each Receipt this Period

29.71

C.

Full Name (Last, First, Middle Initial)

ANDREW P LEICHT

Mailing Address 2318 Coach Rd.

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465582

Amount of Each Receipt this Period

26.54

SUBTOTAL of Receipts This Page (optional)

85.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 133 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ANDREW P LEIGHT

Mailing Address 2318 Coach Rd.

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617356

Amount of Each Receipt this Period

26.54

B.

Full Name (Last, First, Middle Initial)

NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City

ACWORTH

State

GA

Zip Code

30101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465646

Amount of Each Receipt this Period

22.67

C.

Full Name (Last, First, Middle Initial)

NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City

ACWORTH

State

GA

Zip Code

30101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.25

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617419

Amount of Each Receipt this Period

22.67

SUBTOTAL of Receipts This Page (optional)

71.88

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 134 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KELLY J LIEN

Mailing Address 3 BEDFORD COURT

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.44

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465795

Amount of Each Receipt this Period

20.14

B.

Full Name (Last, First, Middle Initial)

KELLY J LIEN

Mailing Address 3 BEDFORD COURT

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617566

Amount of Each Receipt this Period

20.14

C.

Full Name (Last, First, Middle Initial)

CHARLES M LITTLE

Mailing Address 20 STONEGATE POINT

City

HOT SPRINGS

State

AR

Zip Code

71913

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.46

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465750

Amount of Each Receipt this Period

13.97

SUBTOTAL of Receipts This Page (optional)

54.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 135 / 276

(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

A.

Full Name (Last, First, Middle Initial)
CHARLES M LITTLE

Mailing Address 20 STONEGATE POINT

City State Zip Code
HOT SPRINGS AR 71913

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Market Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.43

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617522

Amount of Each Receipt this Period

13.97

B.

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

Mailing Address 4536 N. Leavitt

City State Zip Code
CHICAGO IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465629

Amount of Each Receipt this Period

31.25

C.

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

Mailing Address 4536 N. Leavitt

City State Zip Code
CHICAGO IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.95

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617402

Amount of Each Receipt this Period

31.25

SUBTOTAL of Receipts This Page (optional)

76.47

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 136 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

ROBERT W LOPEZ Jr

Mailing Address 456 S. Wilke Road

City

Palatine

State

IL

Zip Code

60074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Allstate Financial Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465627

Amount of Each Receipt this Period

26.51

B.

Full Name (Last, First, Middle Initial)

RHONDA J LOWE

Mailing Address 2568 Carrington Way

City

Frederick

State

MD

Zip Code

21702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465706

Amount of Each Receipt this Period

12.87

C.

Full Name (Last, First, Middle Initial)

RHONDA J LOWE

Mailing Address 2568 Carrington Way

City

Frederick

State

MD

Zip Code

21702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.53

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617478

Amount of Each Receipt this Period

12.87

SUBTOTAL of Receipts This Page (optional)

52.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 137 / 276

(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

A.

Full Name (Last, First, Middle Initial)

GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City

GLENDAL

State

CA

Zip Code

91226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465813

Amount of Each Receipt this Period

31.36

B.

Full Name (Last, First, Middle Initial)

GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City

GLENDAL

State

CA

Zip Code

91226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.36

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617584

Amount of Each Receipt this Period

31.36

C.

Full Name (Last, First, Middle Initial)

COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City

SCHAUMBURG

State

IL

Zip Code

60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465649

Amount of Each Receipt this Period

20.88

SUBTOTAL of Receipts This Page (optional)

83.60

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 138 / 276

(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

A.

Full Name (Last, First, Middle Initial)

COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City

SCHAUMBURG

State

IL

Zip Code

60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617422

Amount of Each Receipt this Period

20.88

B.

Full Name (Last, First, Middle Initial)

BENJAMIN E LUMICAO

Mailing Address 343 S. DEARBORN ST. APT. 504

City

CHICAGO

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465674

Amount of Each Receipt this Period

33.64

C.

Full Name (Last, First, Middle Initial)

BENJAMIN E LUMICAO

Mailing Address 343 S. DEARBORN ST. APT. 504

City

CHICAGO

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617447

Amount of Each Receipt this Period

33.64

SUBTOTAL of Receipts This Page (optional)

88.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 139 / 276

(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

A.

Full Name (Last, First, Middle Initial)
DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.28

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465732

Amount of Each Receipt this Period

29.96

B.

Full Name (Last, First, Middle Initial)
DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.24

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617504

Amount of Each Receipt this Period

29.96

C.

Full Name (Last, First, Middle Initial)
MORRIS A MADURO

Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.76

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465441

Amount of Each Receipt this Period

41.62

SUBTOTAL of Receipts This Page (optional)

101.54

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 140 / 276

(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

A.

Full Name (Last, First, Middle Initial)
MORRIS A MADURO

Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

783.38

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617216

Amount of Each Receipt this Period

41.62

B.

Full Name (Last, First, Middle Initial)
KATHERINE MALCOMSON

Mailing Address 185 NILES EAST

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Education and Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465716

Amount of Each Receipt this Period

15.26

C.

Full Name (Last, First, Middle Initial)
KATHERINE MALCOMSON

Mailing Address 185 NILES EAST

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Education and Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617488

Amount of Each Receipt this Period

15.26

SUBTOTAL of Receipts This Page (optional)

72.14

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 141 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.06

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465585

Amount of Each Receipt this Period

20.33

B.

Full Name (Last, First, Middle Initial)

KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.39

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617359

Amount of Each Receipt this Period

20.33

C.

Full Name (Last, First, Middle Initial)

Rhonda J Masser

Mailing Address 856 SPRINGHILL CT

City

ELGIN

State

IL

Zip Code

60120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465551

Amount of Each Receipt this Period

17.69

SUBTOTAL of Receipts This Page (optional)

58.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 142 / 276

(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

A.

Full Name (Last, First, Middle Initial)

Rhonda J Masser

Mailing Address 856 SPRINGHILL CT

City

ELGIN

State

IL

Zip Code

60120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.71

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617325

Amount of Each Receipt this Period

17.69

B.

Full Name (Last, First, Middle Initial)

JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City

LAKE BLUFF

State

IL

Zip Code

60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.24

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465675

Amount of Each Receipt this Period

20.48

C.

Full Name (Last, First, Middle Initial)

JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City

LAKE BLUFF

State

IL

Zip Code

60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617448

Amount of Each Receipt this Period

20.48

SUBTOTAL of Receipts This Page (optional)

58.65

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 143 / 276

(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

A.

Full Name (Last, First, Middle Initial)

Michele C Mayes

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 ▼

917.54

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465824

Amount of Each Receipt this Period

131.08

B.

Full Name (Last, First, Middle Initial)

Michele C Mayes

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 ▼

1048.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617595

Amount of Each Receipt this Period

131.08

C.

Full Name (Last, First, Middle Initial)

W. D Mays

Mailing Address 1804 Prairie St

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465498

Amount of Each Receipt this Period

19.31

SUBTOTAL of Receipts This Page (optional)

281.47

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 144 / 276

(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

A.

Full Name (Last, First, Middle Initial)

W. D Mays

Mailing Address 1804 Prairie St

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.89

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617273

Amount of Each Receipt this Period

19.31

B.

Full Name (Last, First, Middle Initial)

MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City

BARRINGTON HILL

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Deputy G

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1471.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465659

Amount of Each Receipt this Period

82.45

C.

Full Name (Last, First, Middle Initial)

MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City

BARRINGTON HILL

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Deputy G

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1553.87

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617432

Amount of Each Receipt this Period

82.45

SUBTOTAL of Receipts This Page (optional)

184.21

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 145 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
 Hawthorn Woods IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

726.88

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465606

Amount of Each Receipt this Period

40.56

B.

Full Name (Last, First, Middle Initial)

JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code
 Hawthorn Woods IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.44

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617380

Amount of Each Receipt this Period

40.56

C.

Full Name (Last, First, Middle Initial)

SALLY J MCCARTHY

Mailing Address 1036 ROLLING PASS

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AF Sr Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.46

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465657

Amount of Each Receipt this Period

18.71

SUBTOTAL of Receipts This Page (optional)

99.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 146 / 276

(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

A.

Full Name (Last, First, Middle Initial)

SALLY J MCCARTHY

Mailing Address 1036 ROLLING PASS

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AF Sr Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.17

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617430

Amount of Each Receipt this Period

18.71

B.

Full Name (Last, First, Middle Initial)

BRIAN D MCCLELLAN

Mailing Address 1330 Berkshire Ln

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465655

Amount of Each Receipt this Period

16.14

C.

Full Name (Last, First, Middle Initial)

BRIAN D MCCLELLAN

Mailing Address 1330 Berkshire Ln

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617428

Amount of Each Receipt this Period

16.14

SUBTOTAL of Receipts This Page (optional)

50.99

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 147 / 276

(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

A.

Full Name (Last, First, Middle Initial)
LINDA H MCCLELLAN

Mailing Address 5561 Hilltop Lane

City State Zip Code
Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Technical Claim Process S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465757

Amount of Each Receipt this Period

14.49

B.

Full Name (Last, First, Middle Initial)
LINDA H MCCLELLAN

Mailing Address 5561 Hilltop Lane

City State Zip Code
Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Technical Claim Process S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.11

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617529

Amount of Each Receipt this Period

14.49

C.

Full Name (Last, First, Middle Initial)
JOSEPH P MCCORMICK

Mailing Address 808 PARKDALE CT.

City State Zip Code
SOUTHLAKE TX 76092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465485

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)

45.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 148 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOSEPH P MCCORMICK

Mailing Address 808 PARKDALE CT.

City

SOUTHLAKE

State

TX

Zip Code

76092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.65

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617260

Amount of Each Receipt this Period

16.35

B.

Full Name (Last, First, Middle Initial)

MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.08

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465796

Amount of Each Receipt this Period

24.66

C.

Full Name (Last, First, Middle Initial)

MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617567

Amount of Each Receipt this Period

24.66

SUBTOTAL of Receipts This Page (optional)

65.67

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 149 / 276

(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

A.

Full Name (Last, First, Middle Initial)
EVA M MCINTEE

Mailing Address 103 Wateredge Court

City State Zip Code
Safety Harbor FL 34695

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465791

Amount of Each Receipt this Period

38.34

B.

Full Name (Last, First, Middle Initial)
EVA M MCINTEE

Mailing Address 103 Wateredge Court

City State Zip Code
Safety Harbor FL 34695

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.54

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617563

Amount of Each Receipt this Period

38.34

C.

Full Name (Last, First, Middle Initial)
MICHAEL MCKINNEY

Mailing Address 5065 Raintree Circle

City State Zip Code
Parker CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465493

Amount of Each Receipt this Period

25.99

SUBTOTAL of Receipts This Page (optional)

102.67

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 150 / 276

(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

A.

Full Name (Last, First, Middle Initial)
MICHAEL MCKINNEY

Mailing Address 5065 Raintree Circle

City State Zip Code
Parker CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.29

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617268

Amount of Each Receipt this Period

25.99

B.

Full Name (Last, First, Middle Initial)
PATRICIA S MCPHERSON

Mailing Address 3133 N. Walker Lane West

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465801

Amount of Each Receipt this Period

16.76

C.

Full Name (Last, First, Middle Initial)
PATRICIA S MCPHERSON

Mailing Address 3133 N. Walker Lane West

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617572

Amount of Each Receipt this Period

16.76

SUBTOTAL of Receipts This Page (optional)

59.51

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 151 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PETER D MCPHERSON

Mailing Address 180 EVERGREEN AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Actuary and Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.64

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465597

Amount of Each Receipt this Period

33.20

B.

Full Name (Last, First, Middle Initial)

PETER D MCPHERSON

Mailing Address 180 EVERGREEN AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Actuary and Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

628.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617371

Amount of Each Receipt this Period

33.20

C.

Full Name (Last, First, Middle Initial)

JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.26

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465528

Amount of Each Receipt this Period

24.39

SUBTOTAL of Receipts This Page (optional)

90.79

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 152 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.65

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617303

Amount of Each Receipt this Period

24.39

B.

Full Name (Last, First, Middle Initial)

STACY L MCWHORTER

Mailing Address 6345 OLD FARM LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465686

Amount of Each Receipt this Period

12.50

C.

Full Name (Last, First, Middle Initial)

STACY L MCWHORTER

Mailing Address 6345 OLD FARM LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617459

Amount of Each Receipt this Period

12.50

SUBTOTAL of Receipts This Page (optional)

49.39

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 153 / 276

(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

A.

Full Name (Last, First, Middle Initial)
DANIEL K MEHIGAN

Mailing Address 1829 GATEWOOD DR

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465728

Amount of Each Receipt this Period

12.67

B.

Full Name (Last, First, Middle Initial)
DANIEL K MEHIGAN

Mailing Address 1829 GATEWOOD DR

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617500

Amount of Each Receipt this Period

12.67

C.

Full Name (Last, First, Middle Initial)
TENA MELFI

Mailing Address 333 E Woodland Rd

City State Zip Code
Lake Bluff IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465831

Amount of Each Receipt this Period

20.98

SUBTOTAL of Receipts This Page (optional)

46.32

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 154 / 276

(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

A.

Full Name (Last, First, Middle Initial)

TENA MELFI

Mailing Address 333 E Woodland Rd

City

Lake Bluff

State

IL

Zip Code

60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617602

Amount of Each Receipt this Period

20.98

B.

Full Name (Last, First, Middle Initial)

GARY A MELLINI

Mailing Address 21050 PRESTWICK DRIVE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.90

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465433

Amount of Each Receipt this Period

35.37

C.

Full Name (Last, First, Middle Initial)

GARY A MELLINI

Mailing Address 21050 PRESTWICK DRIVE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.27

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617208

Amount of Each Receipt this Period

35.37

SUBTOTAL of Receipts This Page (optional)

91.72

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 155 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City

PROSPECT HTS

State

IL

Zip Code

60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465640

Amount of Each Receipt this Period

16.76

B.

Full Name (Last, First, Middle Initial)

HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City

PROSPECT HTS

State

IL

Zip Code

60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617413

Amount of Each Receipt this Period

16.76

C.

Full Name (Last, First, Middle Initial)

JOHN W MICHELI

Mailing Address 1328 FOREVER AVE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP - Emerging Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465442

Amount of Each Receipt this Period

18.33

SUBTOTAL of Receipts This Page (optional)

51.85

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 156 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

JOHN W MICHELI

Mailing Address 1328 FOREVER AVE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP - Emerging Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617217

Amount of Each Receipt this Period

18.33

B.

Full Name (Last, First, Middle Initial)

FREDERICK J MILLER

Mailing Address 6975 MEADOW POINT TER

City

NEW MARKET

State

MD

Zip Code

21774

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional EB Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465544

Amount of Each Receipt this Period

28.59

C.

Full Name (Last, First, Middle Initial)

FREDERICK J MILLER

Mailing Address 6975 MEADOW POINT TER

City

NEW MARKET

State

MD

Zip Code

21774

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional EB Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617319

Amount of Each Receipt this Period

28.59

SUBTOTAL of Receipts This Page (optional)

75.51

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 157 / 276

(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

A.

Full Name (Last, First, Middle Initial)

STEVEN M MILLER

Mailing Address 1011 Redwood Drive

City

ALGONQUIN

State

IL

Zip Code

60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.96

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465709

Amount of Each Receipt this Period

23.42

B.

Full Name (Last, First, Middle Initial)

STEVEN M MILLER

Mailing Address 1011 Redwood Drive

City

ALGONQUIN

State

IL

Zip Code

60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.38

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617481

Amount of Each Receipt this Period

23.42

C.

Full Name (Last, First, Middle Initial)

AMY B MILLS

Mailing Address 2305 N. VERDE DRIVE

City

ARLINGTON HTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.28

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465818

Amount of Each Receipt this Period

16.42

SUBTOTAL of Receipts This Page (optional)

63.26

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 158 / 276

(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

A.

Full Name (Last, First, Middle Initial)

AMY B MILLS

Mailing Address 2305 N. VERDE DRIVE

City

ARLINGTON HTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617589

Amount of Each Receipt this Period

16.42

B.

Full Name (Last, First, Middle Initial)

ROBERT G MINER

Mailing Address 36832 DEER TRAIL DR

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465503

Amount of Each Receipt this Period

13.54

C.

Full Name (Last, First, Middle Initial)

ROBERT G MINER

Mailing Address 36832 DEER TRAIL DR

City

LAKE VILLA

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617278

Amount of Each Receipt this Period

13.54

SUBTOTAL of Receipts This Page (optional)

43.50

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 159 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

APRIL A MINKUS

Mailing Address 1056 GREENTREE Ave.

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465633

Amount of Each Receipt this Period

15.83

B.

Full Name (Last, First, Middle Initial)

APRIL A MINKUS

Mailing Address 1056 GREENTREE Ave.

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617406

Amount of Each Receipt this Period

15.83

C.

Full Name (Last, First, Middle Initial)

ALLISON MISQUEZ

Mailing Address 1234 Diana Court

City

Upland

State

CA

Zip Code

91786

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465805

Amount of Each Receipt this Period

14.19

SUBTOTAL of Receipts This Page (optional)

45.85

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 160 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ALLISON MISQUEZ

Mailing Address 1234 Diana Court

City

Upland

State

CA

Zip Code

91786

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.61

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617576

Amount of Each Receipt this Period

14.19

B.

Full Name (Last, First, Middle Initial)

ALLISON L MOE

Mailing Address 215 Brampton Lane

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465610

Amount of Each Receipt this Period

18.46

C.

Full Name (Last, First, Middle Initial)

ALLISON L MOE

Mailing Address 215 Brampton Lane

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.26

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617384

Amount of Each Receipt this Period

18.46

SUBTOTAL of Receipts This Page (optional)

51.11

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 161 / 276

(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

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.

Full Name (Last, First, Middle Initial)

MARCIE E MOLEK

Mailing Address 400 KEVIN LANE

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465592

Amount of Each Receipt this Period

24.35

B.

Full Name (Last, First, Middle Initial)

MARCIE E MOLEK

Mailing Address 400 KEVIN LANE

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.81

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617366

Amount of Each Receipt this Period

24.35

C.

Full Name (Last, First, Middle Initial)

SHARON L MOLLER

Mailing Address 19702 88TH AVE W

City

EDMONDS

State

WA

Zip Code

98026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465800

Amount of Each Receipt this Period

17.00

SUBTOTAL of Receipts This Page (optional)

65.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 162 / 276

(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

A.

Full Name (Last, First, Middle Initial)

SHARON L MOLLER

Mailing Address 19702 88TH AVE W

City

EDMONDS

State

WA

Zip Code

98026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.40

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617571

Amount of Each Receipt this Period

17.00

B.

Full Name (Last, First, Middle Initial)

DEBBIE A MORALES

Mailing Address 21285 S. BOSCHOME CIRCLE

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.06

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465748

Amount of Each Receipt this Period

36.07

C.

Full Name (Last, First, Middle Initial)

DEBBIE A MORALES

Mailing Address 21285 S. BOSCHOME CIRCLE

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.13

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617520

Amount of Each Receipt this Period

36.07

SUBTOTAL of Receipts This Page (optional)

89.14

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 163 / 276

(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

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.

Full Name (Last, First, Middle Initial)

KAREN S MORRIS

Mailing Address 27707 LA VISTA DRIVE

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465678

Amount of Each Receipt this Period

43.41

B.

Full Name (Last, First, Middle Initial)

KAREN S MORRIS

Mailing Address 27707 LA VISTA DRIVE

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617451

Amount of Each Receipt this Period

58.50

C.

Full Name (Last, First, Middle Initial)

J R MOSELEY III, III

Mailing Address 1709 Montclair Blvd

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465508

Amount of Each Receipt this Period

15.07

SUBTOTAL of Receipts This Page (optional)

116.98

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 164 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

J R MOSELEY III, III

Mailing Address 1709 Montclair Blvd

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617283

Amount of Each Receipt this Period

15.07

B.

Full Name (Last, First, Middle Initial)

DAVID J MUELLER

Mailing Address 642 Maple Lane

City

Batavia

State

IL

Zip Code

60510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Security Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465618

Amount of Each Receipt this Period

13.05

C.

Full Name (Last, First, Middle Initial)

DAVID J MUELLER

Mailing Address 642 Maple Lane

City

Batavia

State

IL

Zip Code

60510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Security Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617392

Amount of Each Receipt this Period

13.05

SUBTOTAL of Receipts This Page (optional)

41.17

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 165 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.86

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465491

Amount of Each Receipt this Period

35.77

B.

Full Name (Last, First, Middle Initial)

MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.63

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617266

Amount of Each Receipt this Period

35.77

C.

Full Name (Last, First, Middle Initial)

MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465579

Amount of Each Receipt this Period

40.26

SUBTOTAL of Receipts This Page (optional)

111.80

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 166 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.26

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617353

Amount of Each Receipt this Period

40.26

B.

Full Name (Last, First, Middle Initial)

MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.86

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465761

Amount of Each Receipt this Period

39.77

C.

Full Name (Last, First, Middle Initial)

MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.63

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617533

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

119.80

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 167 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

LINDA J MYERS

Mailing Address 3105 Pheasant Creek Drive

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Tax Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465753

Amount of Each Receipt this Period

16.49

B.

Full Name (Last, First, Middle Initial)

LINDA J MYERS

Mailing Address 3105 Pheasant Creek Drive

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Tax Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617525

Amount of Each Receipt this Period

16.49

C.

Full Name (Last, First, Middle Initial)

DON J MYKETIAK

Mailing Address 28W770 HAWTHORNE LANE

City

WEST CHICAGO

State

IL

Zip Code

60185

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465639

Amount of Each Receipt this Period

13.29

SUBTOTAL of Receipts This Page (optional)

46.27

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 168 / 276

(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

A.

Full Name (Last, First, Middle Initial)
DON J MYKETIAK

Mailing Address 28W770 HAWTHORNE LANE

City State Zip Code
WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.43

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617412

Amount of Each Receipt this Period

13.29

B.

Full Name (Last, First, Middle Initial)
DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.08

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465699

Amount of Each Receipt this Period

57.60

C.

Full Name (Last, First, Middle Initial)
DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1087.68

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617471

Amount of Each Receipt this Period

57.60

SUBTOTAL of Receipts This Page (optional)

128.49

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 169 / 276
(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

A.

Full Name (Last, First, Middle Initial)

JOAN M NAUGHTON

Mailing Address 650 MALIBOU

City

PALATINE

State

IL

Zip Code

60074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.12

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465676

Amount of Each Receipt this Period

19.84

B.

Full Name (Last, First, Middle Initial)

JOAN M NAUGHTON

Mailing Address 650 MALIBOU

City

PALATINE

State

IL

Zip Code

60074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.96

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617449

Amount of Each Receipt this Period

19.84

C.

Full Name (Last, First, Middle Initial)

DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City

LAKE BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2130.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465561

Amount of Each Receipt this Period

118.87

SUBTOTAL of Receipts This Page (optional)

158.55

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 170 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City

LAKE BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2249.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617335

Amount of Each Receipt this Period

118.87

B.

Full Name (Last, First, Middle Initial)

PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1004.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465763

Amount of Each Receipt this Period

56.30

C.

Full Name (Last, First, Middle Initial)

PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1061.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617535

Amount of Each Receipt this Period

56.30

SUBTOTAL of Receipts This Page (optional)

231.47

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 171 / 276
(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

A.

Full Name (Last, First, Middle Initial)

THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City

WAUKEGAN

State

IL

Zip Code

60085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Senior Man

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.96

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465691

Amount of Each Receipt this Period

31.06

B.

Full Name (Last, First, Middle Initial)

THOMAS R NORTON

Mailing Address 1423 PIONEER COURT

City

WAUKEGAN

State

IL

Zip Code

60085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Senior Man

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617463

Amount of Each Receipt this Period

31.06

C.

Full Name (Last, First, Middle Initial)

NICHOLAS A NOTTE

Mailing Address 743 OLD WESTBURY RD.

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

774.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465825

Amount of Each Receipt this Period

43.42

SUBTOTAL of Receipts This Page (optional)

105.54

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 172 / 276

(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

A.

Full Name (Last, First, Middle Initial)

NICHOLAS A NOTTE

Mailing Address 743 OLD WESTBURY RD.

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617596

Amount of Each Receipt this Period

43.42

B.

Full Name (Last, First, Middle Initial)

Patrick M O'Brien

Mailing Address 976 Hampton Park

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP - Emerging Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1165.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465837

Amount of Each Receipt this Period

64.73

C.

Full Name (Last, First, Middle Initial)

RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465553

Amount of Each Receipt this Period

20.33

SUBTOTAL of Receipts This Page (optional)

128.48

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 173 / 276

(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

A.

Full Name (Last, First, Middle Initial)
RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code
LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.91

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617327

Amount of Each Receipt this Period

20.33

B.

Full Name (Last, First, Middle Initial)
JOHN O'MALLEY

Mailing Address 1816 ASPEN LANE

City State Zip Code
MOUNT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465668

Amount of Each Receipt this Period

16.59

C.

Full Name (Last, First, Middle Initial)
JOHN O'MALLEY

Mailing Address 1816 ASPEN LANE

City State Zip Code
MOUNT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617441

Amount of Each Receipt this Period

16.59

SUBTOTAL of Receipts This Page (optional)

53.51

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 174 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465453

Amount of Each Receipt this Period

30.26

B.

Full Name (Last, First, Middle Initial)

MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.98

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617228

Amount of Each Receipt this Period

30.26

C.

Full Name (Last, First, Middle Initial)

BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465680

Amount of Each Receipt this Period

15.27

SUBTOTAL of Receipts This Page (optional)

75.79

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 175 / 276

(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

A.

Full Name (Last, First, Middle Initial)

BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.05

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617453

Amount of Each Receipt this Period

15.27

B.

Full Name (Last, First, Middle Initial)

ANGELA P O'TOOLE

Mailing Address 611 SILVER BERRY DRIVE

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.98

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465632

Amount of Each Receipt this Period

16.83

C.

Full Name (Last, First, Middle Initial)

ANGELA P O'TOOLE

Mailing Address 611 SILVER BERRY DRIVE

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.81

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617405

Amount of Each Receipt this Period

16.83

SUBTOTAL of Receipts This Page (optional)

48.93

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 176 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL C OCONNOR

Mailing Address 1231 Isabella Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.08

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465581

Amount of Each Receipt this Period

13.62

B.

Full Name (Last, First, Middle Initial)

MICHAEL C OCONNOR

Mailing Address 1231 Isabella Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617355

Amount of Each Receipt this Period

13.62

C.

Full Name (Last, First, Middle Initial)

ROGER D ODLE II, II

Mailing Address 5170 BARCROFT DRIVE

City

HOFFMAN ESTATES

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465666

Amount of Each Receipt this Period

41.26

SUBTOTAL of Receipts This Page (optional)

68.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 177 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ROGER D ODLE II, II

Mailing Address 5170 BARCROFT DRIVE

City

HOFFMAN ESTATES

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617439

Amount of Each Receipt this Period

41.26

B.

Full Name (Last, First, Middle Initial)

KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

721.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465537

Amount of Each Receipt this Period

40.16

C.

Full Name (Last, First, Middle Initial)

KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617312

Amount of Each Receipt this Period

40.16

SUBTOTAL of Receipts This Page (optional)

121.58

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 178 / 276
(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

A.

Full Name (Last, First, Middle Initial)

JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President PCCSO Fiel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.40

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465754

Amount of Each Receipt this Period

71.16

B.

Full Name (Last, First, Middle Initial)

JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President PCCSO Fiel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1344.56

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617526

Amount of Each Receipt this Period

71.16

C.

Full Name (Last, First, Middle Initial)

PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP PCCSO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465526

Amount of Each Receipt this Period

43.43

SUBTOTAL of Receipts This Page (optional)

185.75

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 179 / 276

(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

A.

Full Name (Last, First, Middle Initial)
PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.93

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617301

Amount of Each Receipt this Period

43.43

B.

Full Name (Last, First, Middle Initial)
DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.10

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465486

Amount of Each Receipt this Period

44.05

C.

Full Name (Last, First, Middle Initial)
DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.15

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617261

Amount of Each Receipt this Period

44.05

SUBTOTAL of Receipts This Page (optional)

131.53

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 180 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MAYUR M PATEL

Mailing Address 742 E PARKVIEW CT

City

ROSELLE

State

IL

Zip Code

60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465603

Amount of Each Receipt this Period

32.18

B.

Full Name (Last, First, Middle Initial)

MAYUR M PATEL

Mailing Address 742 E PARKVIEW CT

City

ROSELLE

State

IL

Zip Code

60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617377

Amount of Each Receipt this Period

32.18

C.

Full Name (Last, First, Middle Initial)

CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

General Vice President Em

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1394.10

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465476

Amount of Each Receipt this Period

77.79

SUBTOTAL of Receipts This Page (optional)

142.15

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 181 / 276

(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

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.

Full Name (Last, First, Middle Initial)

CHARLES PAUL

Mailing Address 301 CAMELOT LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

General Vice President Em

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1471.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617251

Amount of Each Receipt this Period

77.79

B.

Full Name (Last, First, Middle Initial)

LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Homeowner Initiative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465693

Amount of Each Receipt this Period

39.17

C.

Full Name (Last, First, Middle Initial)

LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Homeowner Initiative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

739.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617465

Amount of Each Receipt this Period

39.17

SUBTOTAL of Receipts This Page (optional)

156.13

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 182 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.Full Name (Last, First, Middle Initial)
RONALD J PEPPING

Mailing Address 2721 Acorn Ct.

City	State	Zip Code
West Dundee	IL	60118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465642

Amount of Each Receipt this Period

31.07

B.Full Name (Last, First, Middle Initial)
RONALD J PEPPING

Mailing Address 2721 Acorn Ct.

City	State	Zip Code
West Dundee	IL	60118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617415

Amount of Each Receipt this Period

31.07

C.Full Name (Last, First, Middle Initial)
FLORIE S PERELLIS

Mailing Address 1480 MINTHAVEN RD

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465445

Amount of Each Receipt this Period

52.83

SUBTOTAL of Receipts This Page (optional)

114.97

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 183 / 276

(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

A.

Full Name (Last, First, Middle Initial)

FLORIE S PERELLIS

Mailing Address 1480 MINTHAVEN RD

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.65

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617220

Amount of Each Receipt this Period

52.83

B.

Full Name (Last, First, Middle Initial)

NANCY A PERRY

Mailing Address 3575 CALDERWOOD DR

City

ROCKFORD

State

IL

Zip Code

61114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465664

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

NANCY A PERRY

Mailing Address 3575 CALDERWOOD DR

City

ROCKFORD

State

IL

Zip Code

61114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617437

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

92.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 184 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOHN M PETERS

Mailing Address 6727 N Sioux Ave

City

CHICAGO

State

IL

Zip Code

60646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Allstate Financial Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.22

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465803

Amount of Each Receipt this Period

30.99

B.

Full Name (Last, First, Middle Initial)

JOHN M PETERS

Mailing Address 6727 N Sioux Ave

City

CHICAGO

State

IL

Zip Code

60646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Allstate Financial Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.21

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617574

Amount of Each Receipt this Period

30.99

C.

Full Name (Last, First, Middle Initial)

THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.82

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465823

Amount of Each Receipt this Period

31.37

SUBTOTAL of Receipts This Page (optional)

93.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 185 / 276

(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

A.

Full Name (Last, First, Middle Initial)

THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Senior Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.19

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617594

Amount of Each Receipt this Period

31.37

B.

Full Name (Last, First, Middle Initial)

SAMUEL H PILCH

Mailing Address 4519 HICKORY COURT

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Group Vice President & Co

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2616851

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

JOHN C PINTOZZI

Mailing Address 2116 W CHURCHILL ST

City

CHICAGO

State

IL

Zip Code

60647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Finance -

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1321.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465560

Amount of Each Receipt this Period

74.04

SUBTOTAL of Receipts This Page (optional)

1105.41

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 186 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOHN C PINTOZZI

Mailing Address 2116 W CHURCHILL ST

City

CHICAGO

State

IL

Zip Code

60647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Finance -

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1395.36

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617334

Amount of Each Receipt this Period

74.04

B.

Full Name (Last, First, Middle Initial)

Mark D Pitchford

Mailing Address 653 Hinman Ave

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP Direct Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1213.96

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465828

Amount of Each Receipt this Period

67.88

C.

Full Name (Last, First, Middle Initial)

Mark D Pitchford

Mailing Address 653 Hinman Ave

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP Direct Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1281.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617599

Amount of Each Receipt this Period

67.88

SUBTOTAL of Receipts This Page (optional)

209.80

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 187 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

RICHARD E PORTER

Mailing Address 20827 36TH PL W

City

LYNNWOOD

State

WA

Zip Code

98036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Staff Claims Service Adju

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617570

Amount of Each Receipt this Period

10.64

B.

Full Name (Last, First, Middle Initial)

DAVID J PRENDERGAST

Mailing Address 2816 HAVEN LANE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

867.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465439

Amount of Each Receipt this Period

48.49

C.

Full Name (Last, First, Middle Initial)

DAVID J PRENDERGAST

Mailing Address 2816 HAVEN LANE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617214

Amount of Each Receipt this Period

48.49

SUBTOTAL of Receipts This Page (optional)

107.62

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 188 / 276

(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

A.

Full Name (Last, First, Middle Initial)

THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465695

Amount of Each Receipt this Period

22.45

B.

Full Name (Last, First, Middle Initial)

THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.95

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617467

Amount of Each Receipt this Period

22.45

C.

Full Name (Last, First, Middle Initial)

JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City

ARLINGTON HGTS

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.96

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465812

Amount of Each Receipt this Period

33.62

SUBTOTAL of Receipts This Page (optional)

78.52

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 189 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City

ARLINGTON HGTS

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617583

Amount of Each Receipt this Period

33.62

B.

Full Name (Last, First, Middle Initial)

MARY J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City

ARLINGTON HEIGH

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.18

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465721

Amount of Each Receipt this Period

42.15

C.

Full Name (Last, First, Middle Initial)

MARY J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City

ARLINGTON HEIGH

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.33

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617493

Amount of Each Receipt this Period

42.15

SUBTOTAL of Receipts This Page (optional)

117.92

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 190 / 276

(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

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.

Full Name (Last, First, Middle Initial)

JOHN B REARDON

Mailing Address 441 KELLY LANE

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465421

Amount of Each Receipt this Period

45.80

B.

Full Name (Last, First, Middle Initial)

JOHN B REARDON

Mailing Address 441 KELLY LANE

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617196

Amount of Each Receipt this Period

45.80

C.

Full Name (Last, First, Middle Initial)

KEVIN P RICE

Mailing Address 618 Burdick St.

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

683.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465614

Amount of Each Receipt this Period

38.20

SUBTOTAL of Receipts This Page (optional)

129.80

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 191 / 276

(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

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.

Full Name (Last, First, Middle Initial)

KEVIN P RICE

Mailing Address 618 Burdick St.

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617388

Amount of Each Receipt this Period

38.20

B.

Full Name (Last, First, Middle Initial)

BRIAN R RICHARD

Mailing Address 37 JOSEPH PLACE

City

WAYNE

State

NJ

Zip Code

07470

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465414

Amount of Each Receipt this Period

26.89

C.

Full Name (Last, First, Middle Initial)

BRIAN R RICHARD

Mailing Address 37 JOSEPH PLACE

City

WAYNE

State

NJ

Zip Code

07470

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617189

Amount of Each Receipt this Period

26.89

SUBTOTAL of Receipts This Page (optional)

91.98

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 192 / 276

(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

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.

Full Name (Last, First, Middle Initial)

JOSEPH J RICHARDSON

Mailing Address 4968 Astor Court

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP-Protection Distributi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465479

Amount of Each Receipt this Period

85.38

B.

Full Name (Last, First, Middle Initial)

JOSEPH J RICHARDSON

Mailing Address 4968 Astor Court

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP-Protection Distributi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1605.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617254

Amount of Each Receipt this Period

85.38

C.

Full Name (Last, First, Middle Initial)

MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City

OAK LAWN

State

IL

Zip Code

60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

859.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465617

Amount of Each Receipt this Period

48.19

SUBTOTAL of Receipts This Page (optional)

218.95

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 193 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City

OAK LAWN

State

IL

Zip Code

60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

908.17

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617391

Amount of Each Receipt this Period

48.19

B.

Full Name (Last, First, Middle Initial)

TED ROBERTS

Mailing Address 62 Bart Drive

City

Canton

State

CT

Zip Code

06019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465777

Amount of Each Receipt this Period

31.53

C.

Full Name (Last, First, Middle Initial)

TED ROBERTS

Mailing Address 62 Bart Drive

City

Canton

State

CT

Zip Code

06019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617549

Amount of Each Receipt this Period

31.53

SUBTOTAL of Receipts This Page (optional)

111.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 194 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL J ROCHE

Mailing Address 270 KINGSWAY DRIVE

City

AURORA

State

IL

Zip Code

60506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1852.46

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465630

Amount of Each Receipt this Period

103.85

B.

Full Name (Last, First, Middle Initial)

MICHAEL J ROCHE

Mailing Address 270 KINGSWAY DRIVE

City

AURORA

State

IL

Zip Code

60506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1956.31

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617403

Amount of Each Receipt this Period

103.85

C.

Full Name (Last, First, Middle Initial)

GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City

RIVER FOREST

State

IL

Zip Code

60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.12

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465556

Amount of Each Receipt this Period

41.36

SUBTOTAL of Receipts This Page (optional)

249.06

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 195 / 276

(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

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.

Full Name (Last, First, Middle Initial)

GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City

RIVER FOREST

State

IL

Zip Code

60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

779.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617330

Amount of Each Receipt this Period

41.36

B.

Full Name (Last, First, Middle Initial)

JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City

DOWNERS GROVE

State

IL

Zip Code

60515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465665

Amount of Each Receipt this Period

38.14

C.

Full Name (Last, First, Middle Initial)

JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City

DOWNERS GROVE

State

IL

Zip Code

60515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617438

Amount of Each Receipt this Period

38.14

SUBTOTAL of Receipts This Page (optional)

117.64

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 196 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DONALD L RUDD

Mailing Address 25 CRESTVIEW TERRACE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465770

Amount of Each Receipt this Period

14.05

B.

Full Name (Last, First, Middle Initial)

DONALD L RUDD

Mailing Address 25 CRESTVIEW TERRACE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617542

Amount of Each Receipt this Period

14.05

C.

Full Name (Last, First, Middle Initial)

CASSANDRA C RUSSELL

Mailing Address 2483 Titans Lane

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465745

Amount of Each Receipt this Period

13.56

SUBTOTAL of Receipts This Page (optional)

41.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 197 / 276

(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

A.

Full Name (Last, First, Middle Initial)

CASSANDRA C RUSSELL

Mailing Address 2483 Titans Lane

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617517

Amount of Each Receipt this Period

13.56

B.

Full Name (Last, First, Middle Initial)

DOREEN M RYAN

Mailing Address 17 ALSTON COURT

City

RED BANK

State

NJ

Zip Code

07701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465468

Amount of Each Receipt this Period

22.23

C.

Full Name (Last, First, Middle Initial)

DOREEN M RYAN

Mailing Address 17 ALSTON COURT

City

RED BANK

State

NJ

Zip Code

07701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.65

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617243

Amount of Each Receipt this Period

22.23

SUBTOTAL of Receipts This Page (optional)

58.02

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 198 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

PAUL R RYSKE

Mailing Address 898 E. LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465554

Amount of Each Receipt this Period

40.96

B.

Full Name (Last, First, Middle Initial)

PAUL R RYSKE

Mailing Address 898 E. LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617328

Amount of Each Receipt this Period

40.96

C.

Full Name (Last, First, Middle Initial)

PATRICK J SARB

Mailing Address 4517 WAUBANSIE LANE

City

LISLE

State

IL

Zip Code

60532

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465715

Amount of Each Receipt this Period

13.71

SUBTOTAL of Receipts This Page (optional)

95.63

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 199 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PATRICK J SARB

Mailing Address 4517 WAUBANSIE LANE

City

LISLE

State

IL

Zip Code

60532

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.89

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617487

Amount of Each Receipt this Period

13.71

B.

Full Name (Last, First, Middle Initial)

MICHAEL A SCARDINA

Mailing Address 51 SOUTH ROYAL OAK

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.95

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465536

Amount of Each Receipt this Period

29.35

C.

Full Name (Last, First, Middle Initial)

MICHAEL A SCARDINA

Mailing Address 51 SOUTH ROYAL OAK

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617311

Amount of Each Receipt this Period

29.35

SUBTOTAL of Receipts This Page (optional)

72.41

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 200 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KAREN M SCHECHT

Mailing Address 1185 LAKESIDE LANE

City

CAROL STREAM

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.10

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465621

Amount of Each Receipt this Period

13.65

B.

Full Name (Last, First, Middle Initial)

KAREN M SCHECHT

Mailing Address 1185 LAKESIDE LANE

City

CAROL STREAM

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.75

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617395

Amount of Each Receipt this Period

13.65

C.

Full Name (Last, First, Middle Initial)

PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

563.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465669

Amount of Each Receipt this Period

31.59

SUBTOTAL of Receipts This Page (optional)

58.89

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 201 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.33

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617442

Amount of Each Receipt this Period

31.59

B.

Full Name (Last, First, Middle Initial)

STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP HR Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

989.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465470

Amount of Each Receipt this Period

55.19

C.

Full Name (Last, First, Middle Initial)

STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP HR Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1044.69

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617245

Amount of Each Receipt this Period

55.19

SUBTOTAL of Receipts This Page (optional)

141.97

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 202 / 276

(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

A.

Full Name (Last, First, Middle Initial)
DALE J SCHUELLER

Mailing Address 25 Scarlet Oak Rd

City State Zip Code
Flemington NJ 08822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.40

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465767

Amount of Each Receipt this Period

19.44

B.

Full Name (Last, First, Middle Initial)
DALE J SCHUELLER

Mailing Address 25 Scarlet Oak Rd

City State Zip Code
Flemington NJ 08822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617539

Amount of Each Receipt this Period

19.44

C.

Full Name (Last, First, Middle Initial)
JEFFREY C SCHULTZ

Mailing Address 573 MADISON LN

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Product Operations Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465533

Amount of Each Receipt this Period

27.46

SUBTOTAL of Receipts This Page (optional)

66.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 203 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JEFFREY C SCHULTZ

Mailing Address 573 MADISON LN

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.06

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617308

Amount of Each Receipt this Period

27.46

B.

Full Name (Last, First, Middle Initial)

DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.90

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465598

Amount of Each Receipt this Period

27.73

C.

Full Name (Last, First, Middle Initial)

DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.63

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617372

Amount of Each Receipt this Period

27.73

SUBTOTAL of Receipts This Page (optional)

82.92

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 204 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MICHAEL D SCHUSTER

Mailing Address 5908 E Night Glow Cir.

City

Scottsdale

State

AZ

Zip Code

85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465797

Amount of Each Receipt this Period

19.36

B.

Full Name (Last, First, Middle Initial)

MICHAEL D SCHUSTER

Mailing Address 5908 E Night Glow Cir.

City

Scottsdale

State

AZ

Zip Code

85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.24

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617568

Amount of Each Receipt this Period

19.36

C.

Full Name (Last, First, Middle Initial)

DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City

Phoenixville

State

PA

Zip Code

19460

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

887.18

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465731

Amount of Each Receipt this Period

49.65

SUBTOTAL of Receipts This Page (optional)

88.37

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 205 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City

Phoenixville

State

PA

Zip Code

19460

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.83

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617503

Amount of Each Receipt this Period

49.65

B.

Full Name (Last, First, Middle Initial)

ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465451

Amount of Each Receipt this Period

16.93

C.

Full Name (Last, First, Middle Initial)

ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.35

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617226

Amount of Each Receipt this Period

16.93

SUBTOTAL of Receipts This Page (optional)

83.51

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 206 / 276

(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

A.

Full Name (Last, First, Middle Initial)

STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Corporate Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.08

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465658

Amount of Each Receipt this Period

43.62

B.

Full Name (Last, First, Middle Initial)

STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Corporate Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617431

Amount of Each Receipt this Period

43.62

C.

Full Name (Last, First, Middle Initial)

STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City

WHEATON

State

IL

Zip Code

60189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP & CFO Allstate Investm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1546.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465624

Amount of Each Receipt this Period

86.46

SUBTOTAL of Receipts This Page (optional)

173.70

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 207 / 276

(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

A.

Full Name (Last, First, Middle Initial)

STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City

WHEATON

State

IL

Zip Code

60189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP & CFO Allstate Investm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1632.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617398

Amount of Each Receipt this Period

86.46

B.

Full Name (Last, First, Middle Initial)

STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City

HIGHLAND PARK

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.44

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465549

Amount of Each Receipt this Period

20.28

C.

Full Name (Last, First, Middle Initial)

STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City

HIGHLAND PARK

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617323

Amount of Each Receipt this Period

20.28

SUBTOTAL of Receipts This Page (optional)

127.02

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 208 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

Mailing Address 5200 RIDGEGATE WAY

City	State	Zip Code
FAIR OAKS	CA	95628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465711

Amount of Each Receipt this Period

22.34

B.Full Name (Last, First, Middle Initial)
DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City	State	Zip Code
FAIR OAKS	CA	95628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617483

Amount of Each Receipt this Period

22.34

C.Full Name (Last, First, Middle Initial)
ROBERT L SIMMONS

Mailing Address 418 DEUCE DRIVE

City	State	Zip Code
WALL	NJ	07719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465462

Amount of Each Receipt this Period

32.78

SUBTOTAL of Receipts This Page (optional)

77.46

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 209 / 276

(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

A.

Full Name (Last, First, Middle Initial)
ROBERT L SIMMONS

Mailing Address 418 DEUCE DRIVE

City State Zip Code
WALL NJ 07719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.78

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: A2010-2617237

Amount of Each Receipt this Period

32.78

B.

Full Name (Last, First, Middle Initial)
KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.14

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2010

Transaction ID: A2010-2465781

Amount of Each Receipt this Period

39.43

C.

Full Name (Last, First, Middle Initial)
KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.57

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: A2010-2617553

Amount of Each Receipt this Period

39.43

SUBTOTAL of Receipts This Page (optional)

111.64

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 210 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City

HIGHLAND PARK

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465558

Amount of Each Receipt this Period

27.05

B.

Full Name (Last, First, Middle Initial)

ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City

HIGHLAND PARK

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.79

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617332

Amount of Each Receipt this Period

27.05

C.

Full Name (Last, First, Middle Initial)

JOHN G SINICKI

Mailing Address 2117 CARROLL CREEK VIEW CT

City

FREDERICK

State

MD

Zip Code

21702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465522

Amount of Each Receipt this Period

11.19

SUBTOTAL of Receipts This Page (optional)

65.29

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 211 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOHN G SINICKI

Mailing Address 2117 CARROLL CREEK VIEW CT

City

FREDERICK

State

MD

Zip Code

21702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.61

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617297

Amount of Each Receipt this Period

11.19

B.

Full Name (Last, First, Middle Initial)

DAVID W SKEATH

Mailing Address 608 Brooking Court

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.18

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465826

Amount of Each Receipt this Period

19.51

C.

Full Name (Last, First, Middle Initial)

DAVID W SKEATH

Mailing Address 608 Brooking Court

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.69

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617597

Amount of Each Receipt this Period

19.51

SUBTOTAL of Receipts This Page (optional)

50.21

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 212 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.Full Name (Last, First, Middle Initial)
KIMBERLY J SLOANE

Mailing Address 378 N. VISTA AVE

City	State	Zip Code
LOMBARD	IL	60148

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465648

Amount of Each Receipt this Period

40.96

B.Full Name (Last, First, Middle Initial)
KIMBERLY J SLOANE

Mailing Address 378 N. VISTA AVE

City	State	Zip Code
LOMBARD	IL	60148

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617421

Amount of Each Receipt this Period

40.96

C.Full Name (Last, First, Middle Initial)
CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465735

Amount of Each Receipt this Period

34.84

SUBTOTAL of Receipts This Page (optional)

116.76

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 213 / 276

(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

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.Full Name (Last, First, Middle Initial)
CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617507

Amount of Each Receipt this Period

34.84

B.Full Name (Last, First, Middle Initial)
KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465626

Amount of Each Receipt this Period

15.30

C.Full Name (Last, First, Middle Initial)
KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617400

Amount of Each Receipt this Period

15.30

SUBTOTAL of Receipts This Page (optional)

65.44

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 214 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KENNETH D SMITH

Mailing Address 619 N HUMPHREY AVE.

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.82

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465662

Amount of Each Receipt this Period

16.45

B.

Full Name (Last, First, Middle Initial)

KENNETH D SMITH

Mailing Address 619 N HUMPHREY AVE.

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.27

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617435

Amount of Each Receipt this Period

16.45

C.

Full Name (Last, First, Middle Initial)

RICHARD J SMITH, Jr.

Mailing Address 597 TREETOP LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.96

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465749

Amount of Each Receipt this Period

19.70

SUBTOTAL of Receipts This Page (optional)

52.60

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 215 / 276

(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

A.

Full Name (Last, First, Middle Initial)

RICHARD J SMITH, Jr.

Mailing Address 597 TREETOP LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617521

Amount of Each Receipt this Period

19.70

B.

Full Name (Last, First, Middle Initial)

RANDALL D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City

Scottsdale

State

AZ

Zip Code

85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465773

Amount of Each Receipt this Period

32.03

C.

Full Name (Last, First, Middle Initial)

RANDALL D SNITTJER

Mailing Address 11423 E. Blue Sky Drive

City

Scottsdale

State

AZ

Zip Code

85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.61

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617545

Amount of Each Receipt this Period

32.03

SUBTOTAL of Receipts This Page (optional)

83.76

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 216 / 276

(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

A.

Full Name (Last, First, Middle Initial)
STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Vice President Pro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1467.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465723

Amount of Each Receipt this Period

82.04

B.

Full Name (Last, First, Middle Initial)
STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Vice President Pro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1549.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617495

Amount of Each Receipt this Period

82.04

C.

Full Name (Last, First, Middle Initial)
KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City State Zip Code
GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465688

Amount of Each Receipt this Period

34.19

SUBTOTAL of Receipts This Page (optional)

198.27

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 217 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City

GLENVIEW

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.93

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617461

Amount of Each Receipt this Period

34.19

B.

Full Name (Last, First, Middle Initial)

EDWIN M SPECHT

Mailing Address 740 AMBRIA DRIVE

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

686.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465484

Amount of Each Receipt this Period

38.28

C.

Full Name (Last, First, Middle Initial)

EDWIN M SPECHT

Mailing Address 740 AMBRIA DRIVE

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

724.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617259

Amount of Each Receipt this Period

38.28

SUBTOTAL of Receipts This Page (optional)

110.75

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 218 / 276

(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

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.

Full Name (Last, First, Middle Initial)

JAMES G SPORLEDER

Mailing Address 20 LAKESIDE LANE

City

N. BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465682

Amount of Each Receipt this Period

28.07

B.

Full Name (Last, First, Middle Initial)

JAMES G SPORLEDER

Mailing Address 20 LAKESIDE LANE

City

N. BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617455

Amount of Each Receipt this Period

28.07

C.

Full Name (Last, First, Middle Initial)

MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465540

Amount of Each Receipt this Period

50.08

SUBTOTAL of Receipts This Page (optional)

106.22

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 219 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

941.08

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617315

Amount of Each Receipt this Period

50.08

B.

Full Name (Last, First, Middle Initial)

BARBARA J STEELE

Mailing Address 730 CREEKSIDE DR #504

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465608

Amount of Each Receipt this Period

14.00

C.

Full Name (Last, First, Middle Initial)

BARBARA J STEELE

Mailing Address 730 CREEKSIDE DR #504

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617382

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)

78.08

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 220 / 276

(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

A.

Full Name (Last, First, Middle Initial)

EMORY D STEPHENS JR, Jr.

Mailing Address 4711 N WOLCOTT AVE

City

CHICAGO

State

IL

Zip Code

60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465510

Amount of Each Receipt this Period

41.30

B.

Full Name (Last, First, Middle Initial)

EMORY D STEPHENS JR, Jr.

Mailing Address 4711 N WOLCOTT AVE

City

CHICAGO

State

IL

Zip Code

60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

781.46

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617285

Amount of Each Receipt this Period

41.30

C.

Full Name (Last, First, Middle Initial)

LOUIE A STEPHENSON

Mailing Address 1775 FOREST CREEK DR.

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.46

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465755

Amount of Each Receipt this Period

14.61

SUBTOTAL of Receipts This Page (optional)

97.21

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 221 / 276

(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

A.

Full Name (Last, First, Middle Initial)
LOUIE A STEPHENSON

Mailing Address 1775 FOREST CREEK DR.

City State Zip Code
JACKSONVILLE FL 32225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.07

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: A2010-2617527

Amount of Each Receipt this Period

14.61

B.

Full Name (Last, First, Middle Initial)
GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.60

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2010

Transaction ID: A2010-2465519

Amount of Each Receipt this Period

40.84

C.

Full Name (Last, First, Middle Initial)
GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.44

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: A2010-2617294

Amount of Each Receipt this Period

40.84

SUBTOTAL of Receipts This Page (optional)

96.29

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 222 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

MYRON E STOUFFER

Mailing Address 1528 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465515

Amount of Each Receipt this Period

26.36

B.

Full Name (Last, First, Middle Initial)

MYRON E STOUFFER

Mailing Address 1528 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617290

Amount of Each Receipt this Period

26.36

C.

Full Name (Last, First, Middle Initial)

CHRISTINE A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465415

Amount of Each Receipt this Period

26.72

SUBTOTAL of Receipts This Page (optional)

79.44

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 223 / 276

(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

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.

Full Name (Last, First, Middle Initial)

CHRISTINE A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP PCCSO

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

506.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617190

Amount of Each Receipt this Period

26.72

B.

Full Name (Last, First, Middle Initial)

DANIEL J SULLIVAN

Mailing Address 4018 BERRYWOOD DRIVE

City

SEAFORD

State

NY

Zip Code

11783

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Sales Leader

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

242.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465455

Amount of Each Receipt this Period

13.47

C.

Full Name (Last, First, Middle Initial)

DANIEL J SULLIVAN

Mailing Address 4018 BERRYWOOD DRIVE

City

SEAFORD

State

NY

Zip Code

11783

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Sales Leader

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

255.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617230

Amount of Each Receipt this Period

13.47

SUBTOTAL of Receipts This Page (optional)

53.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 224 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1043.36

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465565

Amount of Each Receipt this Period

58.28

B.

Full Name (Last, First, Middle Initial)

KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1101.64

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617339

Amount of Each Receipt this Period

58.28

C.

Full Name (Last, First, Middle Initial)

JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City

ELK GROVE

State

IL

Zip Code

60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

706.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465602

Amount of Each Receipt this Period

39.41

SUBTOTAL of Receipts This Page (optional)

155.97

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 225 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City

ELK GROVE

State

IL

Zip Code

60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.71

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617376

Amount of Each Receipt this Period

39.41

B.

Full Name (Last, First, Middle Initial)

CARL J TACKETT

Mailing Address 307 WENDRON COURT

City

FRANKLIN

State

TN

Zip Code

37069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.84

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465577

Amount of Each Receipt this Period

16.58

C.

Full Name (Last, First, Middle Initial)

CARL J TACKETT

Mailing Address 307 WENDRON COURT

City

FRANKLIN

State

TN

Zip Code

37069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.42

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617351

Amount of Each Receipt this Period

16.58

SUBTOTAL of Receipts This Page (optional)

72.57

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 226 / 276

(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

A.

Full Name (Last, First, Middle Initial)
BENJAMIN A TARVER

Mailing Address 2495 EMERALD LANE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465460

Amount of Each Receipt this Period

23.92

B.

Full Name (Last, First, Middle Initial)
BENJAMIN A TARVER

Mailing Address 2495 EMERALD LANE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.64

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617235

Amount of Each Receipt this Period

23.92

C.

Full Name (Last, First, Middle Initial)
JANICE M TAYLOR

Mailing Address 7335 ATHLONE

City State Zip Code
HOUSTON TX 77088

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.68

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465758

Amount of Each Receipt this Period

24.18

SUBTOTAL of Receipts This Page (optional)

72.02

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 227 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JANICE M TAYLOR

Mailing Address 7335 ATHLONE

City

HOUSTON

State

TX

Zip Code

77088

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.86

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617530

Amount of Each Receipt this Period

24.18

B.

Full Name (Last, First, Middle Initial)

TIMOTHY J TAYLOR

Mailing Address 5314 RENEE AVE.

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465506

Amount of Each Receipt this Period

19.49

C.

Full Name (Last, First, Middle Initial)

TIMOTHY J TAYLOR

Mailing Address 5314 RENEE AVE.

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.15

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617281

Amount of Each Receipt this Period

19.49

SUBTOTAL of Receipts This Page (optional)

63.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 228 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PHILLIP J TELGENHOFF

Mailing Address 1631 DAUNTING DRIVE

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.72

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465802

Amount of Each Receipt this Period

19.78

B.

Full Name (Last, First, Middle Initial)

PHILLIP J TELGENHOFF

Mailing Address 1631 DAUNTING DRIVE

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617573

Amount of Each Receipt this Period

19.78

C.

Full Name (Last, First, Middle Initial)

SEAN D THAKUR

Mailing Address 4657 LAKE POINT CIRCLE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.76

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465752

Amount of Each Receipt this Period

17.26

SUBTOTAL of Receipts This Page (optional)

56.82

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 229 / 276

(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

A.

Full Name (Last, First, Middle Initial)

SEAN D THAKUR

Mailing Address 4657 LAKE POINT CIRCLE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617524

Amount of Each Receipt this Period

17.26

B.

Full Name (Last, First, Middle Initial)

Joy A Thomas

Mailing Address 2240 Henley Street

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.94

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465839

Amount of Each Receipt this Period

12.55

C.

Full Name (Last, First, Middle Initial)

Joy A Thomas

Mailing Address 2240 Henley Street

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.49

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617609

Amount of Each Receipt this Period

12.55

SUBTOTAL of Receipts This Page (optional)

42.36

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 230 / 276

(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

A.

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

Mailing Address 604 BRIER STREET

City State Zip Code
KENILWORTH IL 60043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Administrative Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465822

Amount of Each Receipt this Period

21.41

B.

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

Mailing Address 604 BRIER STREET

City State Zip Code
KENILWORTH IL 60043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Administrative Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.71

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617593

Amount of Each Receipt this Period

21.41

C.

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

Mailing Address 6906 S. BENNETT

City State Zip Code
CHICAGO IL 60649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465604

Amount of Each Receipt this Period

31.86

SUBTOTAL of Receipts This Page (optional)

74.68

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 231 / 276

(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

A.

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

Mailing Address 6906 S. BENNETT

City State Zip Code
CHICAGO IL 60649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.06

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617378

Amount of Each Receipt this Period

31.86

B.

Full Name (Last, First, Middle Initial)
MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City State Zip Code
CHICAGO IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Product Non-Standard

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.68

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465768

Amount of Each Receipt this Period

28.00

C.

Full Name (Last, First, Middle Initial)
MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City State Zip Code
CHICAGO IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Product Non-Standard

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.68

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617540

Amount of Each Receipt this Period

28.00

SUBTOTAL of Receipts This Page (optional)

87.86

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 232 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

WILLIAM J THOMPSON

Mailing Address 1104 Spruce Run Drive

City

Roanoke

State

TX

Zip Code

76262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465507

Amount of Each Receipt this Period

41.27

B.

Full Name (Last, First, Middle Initial)

WILLIAM J THOMPSON

Mailing Address 1104 Spruce Run Drive

City

Roanoke

State

TX

Zip Code

76262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

779.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617282

Amount of Each Receipt this Period

41.27

C.

Full Name (Last, First, Middle Initial)

JAMES C THOMSON

Mailing Address 531 S ALLEN LANE

City

ARLINGTON HTS

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465625

Amount of Each Receipt this Period

32.98

SUBTOTAL of Receipts This Page (optional)

115.52

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 233 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JAMES C THOMSON

Mailing Address 531 S ALLEN LANE

City

ARLINGTON HTS

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Senior Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617399

Amount of Each Receipt this Period

32.98

B.

Full Name (Last, First, Middle Initial)

ROBERT E TRANSON

Mailing Address 2644 N DOUGLAS

City

ARLINGTON HTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Strategic Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465615

Amount of Each Receipt this Period

30.26

C.

Full Name (Last, First, Middle Initial)

ROBERT E TRANSON

Mailing Address 2644 N DOUGLAS

City

ARLINGTON HTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Strategic Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617389

Amount of Each Receipt this Period

30.26

SUBTOTAL of Receipts This Page (optional)

93.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 234 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MELINDA S TUNNER

Mailing Address 5430 TALL OAKS DRIVE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465747

Amount of Each Receipt this Period

50.18

B.

Full Name (Last, First, Middle Initial)

MELINDA S TUNNER

Mailing Address 5430 TALL OAKS DRIVE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617519

Amount of Each Receipt this Period

50.18

C.

Full Name (Last, First, Middle Initial)

RICHARD D TURANO

Mailing Address 4960 S CHESTER ST

City

ENGLEWOOD

State

CO

Zip Code

80111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.46

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465444

Amount of Each Receipt this Period

19.61

SUBTOTAL of Receipts This Page (optional)

119.97

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 235 / 276

(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

A.

Full Name (Last, First, Middle Initial)
RICHARD D TURANO

Mailing Address 4960 S CHESTER ST

City State Zip Code
ENGLEWOOD CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.07

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617219

Amount of Each Receipt this Period

19.61

B.

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

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1034.44

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465622

Amount of Each Receipt this Period

57.72

C.

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

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1092.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617396

Amount of Each Receipt this Period

57.72

SUBTOTAL of Receipts This Page (optional)

135.05

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 236 / 276

(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

A.

Full Name (Last, First, Middle Initial)

HELEN K VAN DAAL

Mailing Address 1300 LONGVALLEY RD.

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465569

Amount of Each Receipt this Period

19.62

B.

Full Name (Last, First, Middle Initial)

HELEN K VAN DAAL

Mailing Address 1300 LONGVALLEY RD.

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617343

Amount of Each Receipt this Period

19.62

C.

Full Name (Last, First, Middle Initial)

JOHN W VAN ETEN

Mailing Address 924 W. Gordon Terrace #3

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Process Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.54

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465673

Amount of Each Receipt this Period

21.36

SUBTOTAL of Receipts This Page (optional)

60.60

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 237 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOHN W VAN ETEN

Mailing Address 924 W. Gordon Terrace #3

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Process Expert

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.65

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617446

Amount of Each Receipt this Period

25.11

B.

Full Name (Last, First, Middle Initial)

LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465635

Amount of Each Receipt this Period

15.71

C.

Full Name (Last, First, Middle Initial)

LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City

CRYSTAL LAKE

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.33

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617408

Amount of Each Receipt this Period

15.71

SUBTOTAL of Receipts This Page (optional)

56.53

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 238 / 276

(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

A.

Full Name (Last, First, Middle Initial)

WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.22

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465564

Amount of Each Receipt this Period

33.03

B.

Full Name (Last, First, Middle Initial)

WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617338

Amount of Each Receipt this Period

33.03

C.

Full Name (Last, First, Middle Initial)

PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1119.46

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465780

Amount of Each Receipt this Period

63.47

SUBTOTAL of Receipts This Page (optional)

129.53

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 239 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1182.93

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617552

Amount of Each Receipt this Period

63.47

B.

Full Name (Last, First, Middle Initial)

BILL VASIOLOGAMBROS

Mailing Address 1309 S. PINE AVE

City

ARLINGTON HTS.

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.86

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465698

Amount of Each Receipt this Period

17.27

C.

Full Name (Last, First, Middle Initial)

BILL VASIOLOGAMBROS

Mailing Address 1309 S. PINE AVE

City

ARLINGTON HTS.

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.13

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617470

Amount of Each Receipt this Period

17.27

SUBTOTAL of Receipts This Page (optional)

98.01

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 240 / 276

(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

A.

Full Name (Last, First, Middle Initial)

RICHARD VAVRA

Mailing Address 2514 S WESLEY AVENUE

City

BERWYN

State

IL

Zip Code

60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

726.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465555

Amount of Each Receipt this Period

40.56

B.

Full Name (Last, First, Middle Initial)

RICHARD VAVRA

Mailing Address 2514 S WESLEY AVENUE

City

BERWYN

State

IL

Zip Code

60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

767.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617329

Amount of Each Receipt this Period

40.56

C.

Full Name (Last, First, Middle Initial)

STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City

WADSWORTH

State

IL

Zip Code

60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Treasure

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1386.83

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465456

Amount of Each Receipt this Period

76.15

SUBTOTAL of Receipts This Page (optional)

157.27

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 241 / 276

(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

A.

Full Name (Last, First, Middle Initial)
STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Treasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1462.98

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617231

Amount of Each Receipt this Period

76.15

B.

Full Name (Last, First, Middle Initial)
MICHAEL F VITALE JR, Jr.

Mailing Address 1824 Roy Lane

City State Zip Code
Forks Twp. PA 18040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.54

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465481

Amount of Each Receipt this Period

15.43

C.

Full Name (Last, First, Middle Initial)
MICHAEL F VITALE JR, Jr.

Mailing Address 1824 Roy Lane

City State Zip Code
Forks Twp. PA 18040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.97

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617256

Amount of Each Receipt this Period

15.43

SUBTOTAL of Receipts This Page (optional)

107.01

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 242 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOAN H WALKER

Mailing Address 850 N. Riverwoods Road

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP-Corporate Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

931.12

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465820

Amount of Each Receipt this Period

51.92

B.

Full Name (Last, First, Middle Initial)

JOAN H WALKER

Mailing Address 850 N. Riverwoods Road

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

SVP-Corporate Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617591

Amount of Each Receipt this Period

51.92

C.

Full Name (Last, First, Middle Initial)

MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City

CLOVIS

State

CA

Zip Code

93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465534

Amount of Each Receipt this Period

28.79

SUBTOTAL of Receipts This Page (optional)

132.63

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 243 / 276

(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

A.

Full Name (Last, First, Middle Initial)

MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City

CLOVIS

State

CA

Zip Code

93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.57

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617309

Amount of Each Receipt this Period

28.79

B.

Full Name (Last, First, Middle Initial)

ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City

PONTE VEDRA

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Credit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1158.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465518

Amount of Each Receipt this Period

64.62

C.

Full Name (Last, First, Middle Initial)

ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City

PONTE VEDRA

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Credit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1223.14

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617293

Amount of Each Receipt this Period

64.62

SUBTOTAL of Receipts This Page (optional)

158.03

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 244 / 276

(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

A.

Full Name (Last, First, Middle Initial)
THOMAS M WARDEN

Mailing Address 770 Bair Island Road #200

City State Zip Code
Redwood City CA 94063

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Research Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.94

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465529

Amount of Each Receipt this Period

36.25

B.

Full Name (Last, First, Middle Initial)
THOMAS M WARDEN

Mailing Address 770 Bair Island Road #200

City State Zip Code
Redwood City CA 94063

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Research Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

683.19

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617304

Amount of Each Receipt this Period

36.25

C.

Full Name (Last, First, Middle Initial)
EDWIN L WASINGER JR, Jr.

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

686.76

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465694

Amount of Each Receipt this Period

38.32

SUBTOTAL of Receipts This Page (optional)

110.82

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 245 / 276

(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

A.

Full Name (Last, First, Middle Initial)

EDWIN L WASINGER JR, Jr.

Mailing Address 6245 MURIFIELD DRIVE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.08

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617466

Amount of Each Receipt this Period

38.32

B.

Full Name (Last, First, Middle Initial)

Robert Wasserman

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1156.56

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465841

Amount of Each Receipt this Period

64.48

C.

Full Name (Last, First, Middle Initial)

Robert Wasserman

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1221.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617610

Amount of Each Receipt this Period

64.48

SUBTOTAL of Receipts This Page (optional)

167.28

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 246 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JOHN A WATSON

Mailing Address 10227 Thurston Groves Blvd.

City

Seminole

State

FL

Zip Code

33778

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.92

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465790

Amount of Each Receipt this Period

16.68

B.

Full Name (Last, First, Middle Initial)

JOHN A WATSON

Mailing Address 10227 Thurston Groves Blvd.

City

Seminole

State

FL

Zip Code

33778

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617562

Amount of Each Receipt this Period

16.68

C.

Full Name (Last, First, Middle Initial)

WILLIAM D WEBB JR, Jr.

Mailing Address 11321 LAURA LANE

City

FRANKFORT

State

IL

Zip Code

60423

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Director FSS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465567

Amount of Each Receipt this Period

18.39

SUBTOTAL of Receipts This Page (optional)

51.75

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 247 / 276

(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

A.

Full Name (Last, First, Middle Initial)

WILLIAM D WEBB JR, Jr.

Mailing Address 11321 LAURA LANE

City

FRANKFORT

State

IL

Zip Code

60423

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Director FSS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.09

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617341

Amount of Each Receipt this Period

18.39

B.

Full Name (Last, First, Middle Initial)

LESLEY R WEBER

Mailing Address 3056 W. Sunnyside #1

City

CHICAGO

State

IL

Zip Code

60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465718

Amount of Each Receipt this Period

13.64

C.

Full Name (Last, First, Middle Initial)

LESLEY R WEBER

Mailing Address 3056 W. Sunnyside #1

City

CHICAGO

State

IL

Zip Code

60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.12

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617490

Amount of Each Receipt this Period

13.64

SUBTOTAL of Receipts This Page (optional)

45.67

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 248 / 276

(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

A.

Full Name (Last, First, Middle Initial)

BRET D WEHRLY

Mailing Address 2079 POWHATAN TRAIL

City

RICHMOND

State

KY

Zip Code

40475

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

New Agency Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.58

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465776

Amount of Each Receipt this Period

13.47

B.

Full Name (Last, First, Middle Initial)

BRET D WEHRLY

Mailing Address 2079 POWHATAN TRAIL

City

RICHMOND

State

KY

Zip Code

40475

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

New Agency Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.05

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617548

Amount of Each Receipt this Period

13.47

C.

Full Name (Last, First, Middle Initial)

JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Bank Cash Management Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465771

Amount of Each Receipt this Period

34.00

SUBTOTAL of Receipts This Page (optional)

60.94

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 249 / 276

(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

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.

Full Name (Last, First, Middle Initial)

JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Bank Cash Management Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617543

Amount of Each Receipt this Period

34.00

B.

Full Name (Last, First, Middle Initial)

JEANETTE S WELLSANDT

Mailing Address 265 N. 22nd Road

City

Unadilla

State

NE

Zip Code

68454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465784

Amount of Each Receipt this Period

19.43

C.

Full Name (Last, First, Middle Initial)

JEANETTE S WELLSANDT

Mailing Address 265 N. 22nd Road

City

Unadilla

State

NE

Zip Code

68454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Human Resource Senior Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617556

Amount of Each Receipt this Period

19.43

SUBTOTAL of Receipts This Page (optional)

72.86

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 250 / 276

(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

A.

Full Name (Last, First, Middle Initial)

JEROME WHITE

Mailing Address 5081 OVERLOOK DR.

City

ROSWELL

State

GA

Zip Code

30075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.75

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617241

Amount of Each Receipt this Period

11.01

B.

Full Name (Last, First, Middle Initial)

Lucie White

Mailing Address 1250 Forest Glen Drive

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Corporate Relations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.36

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465843

Amount of Each Receipt this Period

36.92

C.

Full Name (Last, First, Middle Initial)

Lucie White

Mailing Address 1250 Forest Glen Drive

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Corporate Relations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.28

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617612

Amount of Each Receipt this Period

36.92

SUBTOTAL of Receipts This Page (optional)

84.85

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 251 / 276

(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

A.

Full Name (Last, First, Middle Initial)

SAMUEL W WHITEMAN

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465759

Amount of Each Receipt this Period

35.36

B.

Full Name (Last, First, Middle Initial)

SAMUEL W WHITEMAN

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.40

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617531

Amount of Each Receipt this Period

35.36

C.

Full Name (Last, First, Middle Initial)

CYNTHIA A WHITFIELD

Mailing Address 1818 N. Crenshaw Circle

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Product Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.49

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465459

Amount of Each Receipt this Period

21.27

SUBTOTAL of Receipts This Page (optional)

91.99

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 252 / 276

(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

A.

Full Name (Last, First, Middle Initial)

CYNTHIA A WHITFIELD

Mailing Address 1818 N. Crenshaw Circle

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP-Product Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.76

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617234

Amount of Each Receipt this Period

21.27

B.

Full Name (Last, First, Middle Initial)

CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.86

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465509

Amount of Each Receipt this Period

39.77

C.

Full Name (Last, First, Middle Initial)

CYNTHIA R WHITLEY

Mailing Address 6722 NEW HAMPSHIRE TRAIL

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.63

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617284

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

100.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 253 / 276

(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

A.

Full Name (Last, First, Middle Initial)

GENE T WHOLF

Mailing Address 847 INTERLAKEN DR.

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.04

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465792

Amount of Each Receipt this Period

12.28

B.

Full Name (Last, First, Middle Initial)

GENE T WHOLF

Mailing Address 847 INTERLAKEN DR.

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617564

Amount of Each Receipt this Period

12.28

C.

Full Name (Last, First, Middle Initial)

ROBERT N WHOLF

Mailing Address 847 INTERLAKEN DRIVE

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.22

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465539

Amount of Each Receipt this Period

21.79

SUBTOTAL of Receipts This Page (optional)

46.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 254 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ROBERT N WHOLF

Mailing Address 847 INTERLAKEN DRIVE

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claims Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.01

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617314

Amount of Each Receipt this Period

21.79

B.

Full Name (Last, First, Middle Initial)

JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

628.98

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465580

Amount of Each Receipt this Period

35.23

C.

Full Name (Last, First, Middle Initial)

JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.21

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617354

Amount of Each Receipt this Period

35.23

SUBTOTAL of Receipts This Page (optional)

92.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 255 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Chief Diversity Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465786

Amount of Each Receipt this Period

48.13

B.

Full Name (Last, First, Middle Initial)

ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Chief Diversity Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

914.47

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617558

Amount of Each Receipt this Period

48.13

C.

Full Name (Last, First, Middle Initial)

JAMES L WILLCOX

Mailing Address 1562 Sienna Oak Court

City

Sandy

State

UT

Zip Code

84092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465511

Amount of Each Receipt this Period

23.43

SUBTOTAL of Receipts This Page (optional)

119.69

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 256 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

JAMES L WILLCOX

Mailing Address 1562 Sienna Oak Court

City

Sandy

State

UT

Zip Code

84092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617286

Amount of Each Receipt this Period

23.43

B.

Full Name (Last, First, Middle Initial)

JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City

CLARKSVILLE

State

MD

Zip Code

21029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465605

Amount of Each Receipt this Period

40.73

C.

Full Name (Last, First, Middle Initial)

JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City

CLARKSVILLE

State

MD

Zip Code

21029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617379

Amount of Each Receipt this Period

40.73

SUBTOTAL of Receipts This Page (optional)

104.89

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 257 / 276

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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.

Full Name (Last, First, Middle Initial)

THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4532.38

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465719

Amount of Each Receipt this Period

253.85

B.

Full Name (Last, First, Middle Initial)

THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4786.23

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617491

Amount of Each Receipt this Period

253.85

C.

Full Name (Last, First, Middle Initial)

KURT L WINTER

Mailing Address 1403 N. WALNUT

City

ARLINGTON HGHTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.94

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465816

Amount of Each Receipt this Period

17.83

SUBTOTAL of Receipts This Page (optional)

525.53

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 258 / 276

(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

A.

Full Name (Last, First, Middle Initial)

KURT L WINTER

Mailing Address 1403 N. WALNUT

City

ARLINGTON HGHTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.77

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617587

Amount of Each Receipt this Period

17.83

B.

Full Name (Last, First, Middle Initial)

RONALD W WINTER

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.56

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465687

Amount of Each Receipt this Period

17.98

C.

Full Name (Last, First, Middle Initial)

RONALD W WINTER

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.54

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617460

Amount of Each Receipt this Period

17.98

SUBTOTAL of Receipts This Page (optional)

53.79

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 259 / 276

(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

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.

Full Name (Last, First, Middle Initial)

BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465683

Amount of Each Receipt this Period

20.68

B.

Full Name (Last, First, Middle Initial)

BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617456

Amount of Each Receipt this Period

20.68

C.

Full Name (Last, First, Middle Initial)

ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465760

Amount of Each Receipt this Period

33.11

SUBTOTAL of Receipts This Page (optional)

74.47

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 260 / 276

(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

A.

Full Name (Last, First, Middle Initial)

ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.81

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617532

Amount of Each Receipt this Period

33.11

B.

Full Name (Last, First, Middle Initial)

MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.74

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465458

Amount of Each Receipt this Period

33.43

C.

Full Name (Last, First, Middle Initial)

MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.17

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617233

Amount of Each Receipt this Period

33.43

SUBTOTAL of Receipts This Page (optional)

99.97

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 261 / 276

(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

A.

Full Name (Last, First, Middle Initial)
DAVID E WOOLWINE

Mailing Address 1608 W. ROSEHILL DR

City State Zip Code
CHICAGO IL 60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.76

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465496

Amount of Each Receipt this Period

17.58

B.

Full Name (Last, First, Middle Initial)
DAVID E WOOLWINE

Mailing Address 1608 W. ROSEHILL DR

City State Zip Code
CHICAGO IL 60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.34

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617271

Amount of Each Receipt this Period

17.58

C.

Full Name (Last, First, Middle Initial)
DONALD F WYATT JR, Jr.

Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.48

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465583

Amount of Each Receipt this Period

36.98

SUBTOTAL of Receipts This Page (optional)

72.14

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 262 / 276

(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

A.

Full Name (Last, First, Middle Initial)

DONALD F WYATT JR, Jr.

Mailing Address 811 DRESSER DR.

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.46

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617357

Amount of Each Receipt this Period

36.98

B.

Full Name (Last, First, Middle Initial)

FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP Knowledge Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

989.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465647

Amount of Each Receipt this Period

55.54

C.

Full Name (Last, First, Middle Initial)

FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

VP Knowledge Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1044.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617420

Amount of Each Receipt this Period

55.54

SUBTOTAL of Receipts This Page (optional)

148.06

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 263 / 276

(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

A.

Full Name (Last, First, Middle Initial)
LORI J YELVINGTON

Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1002.96

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2010

Transaction ID: A2010-2465654

Amount of Each Receipt this Period

56.20

B.

Full Name (Last, First, Middle Initial)
LORI J YELVINGTON

Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.16

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: A2010-2617427

Amount of Each Receipt this Period

56.20

C.

Full Name (Last, First, Middle Initial)
RICHARD P YOCIUS

Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Product Pricing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

781.46

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2010

Transaction ID: A2010-2465584

Amount of Each Receipt this Period

43.65

SUBTOTAL of Receipts This Page (optional)

156.05

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 264 / 276

(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

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.Full Name (Last, First, Middle Initial)
RICHARD P YOCIUS

Mailing Address 40135 N GOLDENROD

City	State	Zip Code
WADSWORTH	IL	60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP-Product Pricing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.11

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617358

Amount of Each Receipt this Period

43.65

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

Mailing Address 1861 N. Sawgrass Street

City	State	Zip Code
Vernon Hills	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-Ivantage/Independent A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1983.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

Transaction ID: A2010-2465817

Amount of Each Receipt this Period

110.53

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

Mailing Address 1861 N. Sawgrass Street

City	State	Zip Code
Vernon Hills	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-Ivantage/Independent A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2094.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	1	0

Transaction ID: A2010-2617588

Amount of Each Receipt this Period

110.53

SUBTOTAL of Receipts This Page (optional)

264.71

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 265 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PHILLIP C YOUNG

Mailing Address 2181 APPLE HILL LANE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Director of Flight Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.16

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465609

Amount of Each Receipt this Period

20.14

B.

Full Name (Last, First, Middle Initial)

PHILLIP C YOUNG

Mailing Address 2181 APPLE HILL LANE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Director of Flight Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617383

Amount of Each Receipt this Period

20.14

C.

Full Name (Last, First, Middle Initial)

MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City

ARLINGTON HEIGHTS

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.08

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465644

Amount of Each Receipt this Period

37.42

SUBTOTAL of Receipts This Page (optional)

77.70

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 266 / 276

(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

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

Mailing Address 2609 N PINE AVE

City	State	Zip Code
ARLINGTON HEIGHTS	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617417

Amount of Each Receipt this Period

37.42

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

Mailing Address 1439 STEVENSON DRIVE

City	State	Zip Code
LIBERTYVILLE	IL	60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Allstate Life Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1211.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

Transaction ID: A2010-2465734

Amount of Each Receipt this Period

67.29

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

Mailing Address 1439 STEVENSON DRIVE

City	State	Zip Code
LIBERTYVILLE	IL	60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Allstate Life Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1278.51

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

Transaction ID: A2010-2617506

Amount of Each Receipt this Period

67.29

SUBTOTAL of Receipts This Page (optional)

172.00

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 267 / 276

(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

A.

Full Name (Last, First, Middle Initial)

PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City

VILLA PARK

State

IL

Zip Code

60181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.96

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465704

Amount of Each Receipt this Period

20.04

B.

Full Name (Last, First, Middle Initial)

PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City

VILLA PARK

State

IL

Zip Code

60181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617476

Amount of Each Receipt this Period

20.04

C.

Full Name (Last, First, Middle Initial)

GERALD L ZIMMERMAN JR, Jr.

Mailing Address 2584 Sutton Lane

City

AURORA

State

IL

Zip Code

60502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.50

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465727

Amount of Each Receipt this Period

40.23

SUBTOTAL of Receipts This Page (optional)

80.31

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 268 / 276

(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

A.

Full Name (Last, First, Middle Initial)

GERALD L ZIMMERMAN JR, Jr.

Mailing Address 2584 Sutton Lane

City

AURORA

State

IL

Zip Code

60502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.73

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617499

Amount of Each Receipt this Period

40.23

B.

Full Name (Last, First, Middle Initial)

JERRY D ZINKULA

Mailing Address 920 CEDAR LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465769

Amount of Each Receipt this Period

22.56

C.

Full Name (Last, First, Middle Initial)

JERRY D ZINKULA

Mailing Address 920 CEDAR LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617541

Amount of Each Receipt this Period

22.56

SUBTOTAL of Receipts This Page (optional)

85.35

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 269 / 276

(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

A.

Full Name (Last, First, Middle Initial)

CARLA D ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.44

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 1 0

Transaction ID: A2010-2465783

Amount of Each Receipt this Period

24.38

B.

Full Name (Last, First, Middle Initial)

CARLA D ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.82

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 1 0

Transaction ID: A2010-2617555

Amount of Each Receipt this Period

24.38

SUBTOTAL of Receipts This Page (optional)

48.76

TOTAL This Period (last page this line number only)

27114.43

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

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

FOR LINE NUMBER:
(check only one)

PAGE 270 / 276

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

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.

Full Name (Last, First, Middle Initial)

Fifth Third Bank

Mailing Address 346 West Carol Lane

City
Elmhurst

State
IL

Zip Code
60062

Purpose of Disbursement
September 2010 bank charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: IL

District:

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

Not Applicable

Transaction ID: B347894

Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

107.49

SUBTOTAL of Disbursements This Page (optional)

107.49

TOTAL This Period (last page this line number only)

107.49

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

PAGE 271 / 276

<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

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.

Full Name (Last, First, Middle Initial)

Bachus for Congress

Mailing Address 217 Third Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
ContributionCandidate Name
Spencer Bachus011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: AL District: 06

Transaction ID: B347478

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	0

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Wally Herger for Congress Cmte.

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
ContributionCandidate Name
Wally Herger011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 02

Transaction ID: B346690

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	1	0

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Jackie Speier for Congress

Mailing Address Post Office Box 112

City Burlingame State CA Zip Code 94011

Purpose of Disbursement
ContributionCandidate Name
Jackie Speier011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 12

Transaction ID: B347477

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	0

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 272 / 276

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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.

Full Name (Last, First, Middle Initial)

Karen Bass for Congress

Mailing Address 1010 Vermont Ave. NW Ste 814

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Contribution

Candidate Name
Karen Bass

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: CA District: 33

Transaction ID: B349600

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Barney Frank for Congress

Mailing Address 38 Ivy Street SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Contribution

Candidate Name
Barney Frank

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: MA District: 04

Transaction ID: B349596

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Hoyer for Congress

Mailing Address 4201 Northview Dr. Ste. 307

City
Bowie

State
MD

Zip Code
20716

Purpose of Disbursement
Contribution

Candidate Name
Steny H Hoyer

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: MD District: 05

Transaction ID: B349589

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 273 / 276

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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. Full Name (Last, First, Middle Initial) Menendez for Senate	Transaction ID: B346696
Mailing Address 315 C St. SE Lower Level	Date of Disbursement
	<div> <div>MM / DD / YYYY</div> <div>09 / 02 / 2010</div> </div>
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Robert Menendez	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District:	
B. Full Name (Last, First, Middle Initial) Friends for Harry Reid	Transaction ID: B347479
Mailing Address 426 C St NE Rear Bldg.	Date of Disbursement
	<div> <div>MM / DD / YYYY</div> <div>09 / 13 / 2010</div> </div>
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Harry Reid	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District:	
C. Full Name (Last, First, Middle Initial) Crowley for Congress	Transaction ID: B349598
Mailing Address 50 E Street SE Suite 1	Date of Disbursement
	<div> <div>MM / DD / YYYY</div> <div>09 / 23 / 2010</div> </div>
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Joseph Crowley	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 07	

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 274 / 276

<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

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.

Full Name (Last, First, Middle Initial)

Pennsylvanians for Kanjorski

Mailing Address 1225 Eye St. NW Ste 1260

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name
Paul E Kanjorski

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: PA District: 11

Transaction ID: B346694

Date of Disbursement

09 / 02 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Tim Scott for Congress

Mailing Address 700 12th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name
Tim Scott

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: SC District: 01

Transaction ID: B346692

Date of Disbursement

09 / 02 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Tim Scott for Congress

Mailing Address 700 12th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name
Tim Scott

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: SC District: 01

Transaction ID: B347480

Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 275 / 276

<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

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.

Full Name (Last, First, Middle Initial)

JEB Fund

Mailing Address 7315 Wisconsin Ave Ste 310 East

City State Zip Code
Bethesda MD 20814

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: TX District:

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

Not Applicable

Transaction ID: B346688

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

Moore for Congress

Mailing Address PO Box 16646

City State Zip Code
Milwaukee WI 53216

Purpose of Disbursement
Contribution

Candidate Name
Gwendolynne Moore

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WI District: 04

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

Transaction ID: B349594

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

14500.00

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

PAGE 276 / 276

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

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. Full Name (Last, First, Middle Initial)
Blakeslee for Senate 2012 ID# 1313588

Mailing Address 9321 Silver Bend Lane

City Elk Grove State CA Zip Code 95624

Purpose of Disbursement
G-2012 State Senate 15 CACandidate Name
Sam Blakeslee011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B349583

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 2 3 / 2 0 1 0

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Steve Cooley Atty Gen 2010 ID#1323795

Mailing Address 1201 K Street Ste. 1850

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
G-2010 State Att. General CACandidate Name
Steve Cooley011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B349587

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 2 3 / 2 0 1 0

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Friends of Rick Perry

Mailing Address P.O. Box 12428

City Austin State TX Zip Code 78768

Purpose of Disbursement
G-2010 Governor TXCandidate Name
Rick Perry011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B349209

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 1 0

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional) ▶

9500.00

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

9500.00