

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 61 OF 187
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

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

A. Green, Kellie, H., ,

Mailing Address 2437 4th St

City

Cuyahoga Falls

State

OH

Zip Code

44221-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-PO-RMBC

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2020

Transaction ID : 202005259135-144

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

B. Green, Tammy, L., ,

Mailing Address 5601 S 80th St

City

Lincoln

State

NE

Zip Code

68516-6326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ALR-Leader-Mgr

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : 202005119174-138

Amount of Each Receipt this Period

28.00

☐ Memo Item

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

C. Green, Tammy, L., ,

Mailing Address 5601 S 80th St

City

Lincoln

State

NE

Zip Code

68516-6326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ALR-Leader-Mgr

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2020

Transaction ID : 202005259135-138

Amount of Each Receipt this Period

28.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

116.00

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