



Allstate.
You're in good hands.

February 8, 2008

International Swaps and Derivatives Association, Inc.
Send to: QuebecorProtocol@isda.org

Dear Sirs,

2008 Quebecor CDS Protocol - Adherence

The purpose of this letter is to confirm our adherence to the 2008 Quebecor CDS Protocol, as published by the International Swaps and Derivatives Association, Inc. on January 30, 2008 (the "Protocol"). This letter constitutes an "Adherence Letter" as referred to in the Protocol.

The definitions and provisions contained in the Protocol are incorporated into this Adherence Letter, which will supplement and form part of each Covered Transaction (now or in the future) between us and each other Adhering Party.

1. Specified Terms

The amendments in Section 1 and Schedule 1 of this Protocol shall apply to Covered Transactions to which we are a party.

2. Appointment as Agent and Release

We hereby appoint ISDA as our agent for the limited purposes of the Protocol and accordingly we waive, and hereby release ISDA from, any rights, claims, actions or causes of action whatsoever (whether in contract, tort or otherwise) arising out of, or in any way relating to, this Adherence Letter or our adherence to the Protocol or any actions contemplated as being required by ISDA.

3. DTCC Account Number

For purposes of electronic matching and counterparty recognition, our DTCC Account Number is as follows, but you understand and agree that our failure to provide any such details pursuant to this letter will not affect the legal validity and binding nature of the Protocol with respect to us:

DTCC Account Number: 901 Bank of New York

4. Contact Details

Our contact details for purposes of this Adherence Letter are:

Name: Marvin Lutz, Allstate Insurance Company
Address: 3075 Sanders Road, Northbrook, IL 60062
Telephone: 847-402-1652

International Swaps and Derivatives Association, Inc.
February 8, 2008
page 2

Fax: 847-418-9007
E-mail: mlutz@allstate.com

We consent to the publication of the conformed copy of this letter by ISDA and to the disclosure by ISDA of the contents of this letter.

Yours faithfully,

ALLSTATE INSURANCE COMPANY

By:

Name: Bob Smith
Title: Authorized Signatory
Signature: Bob Smith