

# 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  
The Chubb Corporation Political Action Committee-CHUBBPAC

ADDRESS (number and street) 15 Mountain View Road  
 Check if different than previously reported. (ACC)  
Warren NJ 07059

2. **FEC IDENTIFICATION NUMBER** C00229203  
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 (12G)  
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 06 01 2006 through 06 30 2006

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 Robert A. Marzocchi

Signature of Treasurer Electronically Filed by Robert A. Marzocchi Date 07 14 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
The Chubb Corporation Political Action Committee-CHUBBPAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		18342.27
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	33030.34									
(c) Total Receipts (from Line 19) .....	12623.86	87575.24								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	45654.20	105917.51								
7. Total Disbursements (from Line 31) .....	21500.00	81836.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	24154.20	24081.34								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

The Chubb Corporation Political Action Committee-CHUBBPAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	8072.00	48297.00
(i) Itemized (use Schedule A) .....	4499.00	39032.00
(ii) Unitemized .....	12571.00	87329.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	12571.00	87329.00
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	62.50
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	52.86	183.74
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)) .....	12623.86	87575.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12623.86	87575.24

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	0.00	72.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	72.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21500.00	81763.64
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.....	0.00	0.00
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))..	21500.00	81836.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	21500.00	81836.17

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	12571.00	87329.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12571.00	87329.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	72.53
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	62.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	10.03

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Steven R Pozzi</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 1 Lenore Court		<b>Transaction ID: 14977643</b>	
City State Zip Code Long Valley NJ 07853-3451	Amount of Each Receipt this Period 650.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) <b>B. John C Cavanaugh</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 3775 Farmersville Rd		<b>Transaction ID: 14977644</b>	
City State Zip Code Easton PA 18045-2300	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Gregory P Barabas</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 5 Meadow Lane		<b>Transaction ID: 14977645</b>	
City State Zip Code Annandale NJ 08801-3423	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Daniel Conway</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 1221 24th Street, NW Apt. 303		<b>Transaction ID: 14977646</b>	
City Washington	State DC	Amount of Each Receipt this Period 2000.00	
Zip Code 20037-1132			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Doris M Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6	
Mailing Address 47 Dickinson Road		<b>Transaction ID: 15362627</b>	
City Basking Ridge	State NJ	Amount of Each Receipt this Period 500.00	
Zip Code 07920-4905			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Deanne K Gordon</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6	
Mailing Address 11103 Tupper Lake		<b>Transaction ID: 15362629</b>	
City Houston,	State TX	Amount of Each Receipt this Period 300.00	
Zip Code 77042-1320			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Jeffery A Neighbors</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6	
Mailing Address 4421 Ironwood Drive		<b>Transaction ID: 15656111</b>	
City State Zip Code Flower Mound TX 75028-1657	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Kathleen S Langner</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6	
Mailing Address 81 Sunrise Dr		<b>Transaction ID: 15656112</b>	
City State Zip Code Gillette NJ 07933-1940	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Richard D Reed</b>		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address 3545 Oakland Road		<b>Transaction ID: PR113196587469</b>	
City State Zip Code Bethlehem PA 18020-1309	Amount of Each Receipt this Period 0.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Debra Ann Keiser</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1 Winged Foot Court		<b>Transaction ID: PR113196697469</b>	
City State Zip Code Skillman NJ 08558-2332	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. C _____	Name of Employer Federal Insurance Company Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. Mary M Leahy</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 410 Beechwood Place		<b>Transaction ID: PR113197067469</b>	
City State Zip Code Westfield NJ 07090-3202	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. C _____	Name of Employer Federal Insurance Company Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. John C Cavanaugh</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3775 Farmersville Rd		<b>Transaction ID: PR113197147469</b>	
City State Zip Code Easton PA 18045-2300	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. C _____	Name of Employer Federal Insurance Company Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Suzanne Johnson</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 21 Orchard St.		<b>Transaction ID: PR113197787469</b>	
City State Zip Code <b>Bernardsville NJ 07924-2514</b>	Amount of Each Receipt this Period _____ <b>0.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation SVP/Assoc Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>750.00</b>		P/R Deduction (\$0.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Kevin G Hogan</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 26 Padden Road		<b>Transaction ID: PR113198117469</b>	
City State Zip Code <b>Franklin MA 02038-3637</b>	Amount of Each Receipt this Period _____ <b>50.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>300.00</b>		P/R Deduction (\$25.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Arthur W Cohen</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 19 Congress Dr		<b>Transaction ID: PR113198307469</b>	
City State Zip Code <b>Cromwell CT 06416-1664</b>	Amount of Each Receipt this Period _____ <b>0.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>300.00</b>		P/R Deduction (\$0.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>50.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> John F Kearney		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 42 Woodford Hills		Transaction ID: PR113198357469	
City Avon	State CT	Amount of Each Receipt this Period 42.00	
Zip Code 06001-3923		P/R Deduction (\$21.00 Semi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Terry D Montgomery		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 15 Knollcroft Rd		Transaction ID: PR113198607469	
City Basking Ridge	State NJ	Amount of Each Receipt this Period 0.00	
Zip Code 07920-1912		P/R Deduction (\$0.00 Semi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> James E Gardner		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5 Bolton Drive		Transaction ID: PR113198617469	
City Long Valley	State NJ	Amount of Each Receipt this Period 0.00	
Zip Code 07853-9715		P/R Deduction (\$0.00 Semi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	42.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Timothy T Ellis		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 149 Wyoming Ave		<b>Transaction ID:</b> PR113198687469
City State Zip Code Maplewood NJ 07040-1043	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Federal Insurance Company	Occupation Sr Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> John J Mizzi		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1280 Washington Street		<b>Transaction ID:</b> PR113198707469
City State Zip Code Boston MA 02118-2151	Amount of Each Receipt this Period _____ 0.00	
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$0.00 Semi-Monthly)
Name of Employer Federal Insurance Company	Occupation Sr Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Patrick T Hoey		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 29 Wyatt Road		<b>Transaction ID:</b> PR113198837469
City State Zip Code Garden City NY 11530-3049	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. <b>C</b> _____		P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Federal Insurance Company	Occupation Exec Litig Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>90.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Nicholas Rizzi		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113198887469	
Mailing Address 5 Tamaques Way		Amount of Each Receipt this Period 0.00	
City Westfield	State NJ	Zip Code 07090-3620	
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

<b>B.</b> Full Name (Last, First, Middle Initial) Richard P Soja		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113199187469	
Mailing Address 36 Edgehill Avenue		Amount of Each Receipt this Period 0.00	
City Chatham	State NJ	Zip Code 07928-1937	
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

<b>C.</b> Full Name (Last, First, Middle Initial) Kathleen S Ellis		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113199257469	
Mailing Address 149 Wyoming Avenue, Maplewood		Amount of Each Receipt this Period 50.00	
City Maplewood	State NJ	Zip Code 07040-1043	
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Arthur Beaver</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 33 Covered Bridge Road		<b>Transaction ID: PR113199387469</b>		
City State Zip Code Neshanic Station NJ 08853-4136	Amount of Each Receipt this Period _____ 0.00		P/R Deduction (\$0.00 Semi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b>		_____		
Name of Employer Federal Insurance Company	Occupation Vice President	Aggregate Year-to-Date ▼ _____ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) <b>B. Patricia A Hurley</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 182 Northfield Rd.		<b>Transaction ID: PR113199537469</b>		
City State Zip Code Millington NJ 07946-1328	Amount of Each Receipt this Period _____ 60.00		P/R Deduction (\$30.00 Semi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b>		_____		
Name of Employer Federal Insurance Company	Occupation Sr Vice President	Aggregate Year-to-Date ▼ _____ 241.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) <b>C. Gary Trust</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 41 Longacre Dr		<b>Transaction ID: PR113199867469</b>		
City State Zip Code Livingston NJ 07039-2250	Amount of Each Receipt this Period _____ 0.00		P/R Deduction (\$0.00 Semi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b>		_____		
Name of Employer Federal Insurance Company	Occupation Sr Vice President	Aggregate Year-to-Date ▼ _____ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>60.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Celia Santana</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 68 Crest Drive		<b>Transaction ID: PR113199957469</b>		
City State Zip Code South Orange NJ 07079-1037	Amount of Each Receipt this Period _____ 0.00		P/R Deduction (\$0.00 Semi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b> _____		Amount of Each Receipt this Period _____ 0.00		
Name of Employer Federal Insurance Company	Occupation Sr Vice President	Aggregate Year-to-Date ▼ _____ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) <b>B. Doris M Johnson</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 47 Dickinson Road		<b>Transaction ID: PR113199977469</b>		
City State Zip Code Basking Ridge NJ 07920-4905	Amount of Each Receipt this Period _____ 0.00		P/R Deduction (\$0.00 Semi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b> _____		Amount of Each Receipt this Period _____ 0.00		
Name of Employer Federal Insurance Company	Occupation Sr Vice President	Aggregate Year-to-Date ▼ _____ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) <b>C. Henry L Toker</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 34 Westbrook Way		<b>Transaction ID: PR113200427469</b>		
City State Zip Code Manalapan NJ 07726-3332	Amount of Each Receipt this Period _____ 40.00		P/R Deduction (\$20.00 Semi-Monthly)	
FEC ID number of contributing federal political committee. <b>C</b> _____		Amount of Each Receipt this Period _____ 40.00		
Name of Employer Federal Insurance Company	Occupation Sr Litigation Coun	Aggregate Year-to-Date ▼ _____ 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>40.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Ned I Gerstman</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3 Heather Lane		<b>Transaction ID: PR113201167469</b>	
City Warren	State NJ	Amount of Each Receipt this Period _____ 100.00	
Zip Code 07059-5259			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Exec Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$50.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. Anthony C Schiavone</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1530 16TH St. N.E.		<b>Transaction ID: PR113201217469</b>	
City Naples	State FL	Amount of Each Receipt this Period _____ 40.00	
Zip Code 34120-3447			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	P/R Deduction (\$20.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. Sean M Fitzpatrick</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 121 Great Pond Road		<b>Transaction ID: PR113201387469</b>	
City Simsbury	State CT	Amount of Each Receipt this Period _____ 0.00	
Zip Code 06070-1525			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00	P/R Deduction (\$0.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>140.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Paul N Morrissette		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113201397469
Mailing Address c/o Expatriate Services Department 15 Mountain View Road		Amount of Each Receipt this Period 40.00
City Warren State NJ Zip Code 07059-6711	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Federal Insurance Company Occupation Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 290.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Gary C Petrosino		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113201437469
Mailing Address 1586 Palisades Drive		Amount of Each Receipt this Period 60.00
City Pacific Palisades State CA Zip Code 90272-2105	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$30.00 Semi-Monthly)
Name of Employer Federal Insurance Company Occupation Sr Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 360.00		

<b>C.</b> Full Name (Last, First, Middle Initial) James P Knight		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113201467469
Mailing Address 8 Paris Avenue		Amount of Each Receipt this Period 40.00
City Edison State NJ Zip Code 08820-3851	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Federal Insurance Company Occupation Sr Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	140.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

**A.** Full Name (Last, First, Middle Initial)  
Jayne E Hill

Mailing Address 73 Kendal Ct

City State Zip Code  
Guilford CT 06437-2078

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

Name of Employer Federal Insurance Company Occupation Sr Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

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

**Transaction ID:** PR113201597469

Amount of Each Receipt this Period  
60.00

P/R Deduction (\$30.00 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Richard Simon

Mailing Address 12 Kingston Drive

City State Zip Code  
Livingston NJ 07039-3618

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

Name of Employer Federal Insurance Company Occupation Sr Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

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

**Transaction ID:** PR113201687469

Amount of Each Receipt this Period  
42.00

P/R Deduction (\$21.00 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Henry B Schram

Mailing Address 2 Melrose Lane

City State Zip Code  
Mendham NJ 07945-1300

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

Name of Employer Federal Insurance Company Occupation SVP/Chief Acctg Off

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

**Transaction ID:** PR113201917469

Amount of Each Receipt this Period  
0.00

P/R Deduction (\$0.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>102.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Joel D Aronchick		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113202167469	
Mailing Address 6 East Lane		Amount of Each Receipt this Period 50.00	
City Madison	State NJ	Zip Code 07940-2651	P/R Deduction (\$25.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Gerald A Ippolito		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113202267469	
Mailing Address 7 Algonquin Road		Amount of Each Receipt this Period 0.00	
City Holmdel	State NJ	Zip Code 07733-2214	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Carole J Weber		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113202347469	
Mailing Address 496 Bellwood Park Road		Amount of Each Receipt this Period 0.00	
City Asbury	State NJ	Zip Code 08802-1204	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	50.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. James S Thieringer</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 177 Naughtright Rd		<b>Transaction ID: PR113202497469</b>
City Long Valley	State NJ	Zip Code 07853-3286
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 0.00
Name of Employer Federal Insurance Company	Occupation Vice President	P/R Deduction (\$0.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Peter Palermo</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 504 Denham Arch		<b>Transaction ID: PR113202517469</b>
City Chesapeake	State VA	Zip Code 23322-6845
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 0.00
Name of Employer Federal Insurance Company	Occupation Vice President	P/R Deduction (\$0.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Andrew A Mc Elwee</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4 Stone House Rd		<b>Transaction ID: PR113202627469</b>
City Mendham	State NJ	Zip Code 07945-3125
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 84.00
Name of Employer Federal Insurance Company	Occupation Exec Vice President	P/R Deduction (\$42.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>84.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Peter J Thompson		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113202877469
Mailing Address 8 Delaware Road		Amount of Each Receipt this Period 0.00
City State Zip Code Whitehouse Sta. NJ 08889-3956	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Federal Insurance Company	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		P/R Deduction (\$0.00 Semi-Monthly)

<b>B.</b> Full Name (Last, First, Middle Initial) Frederick W Gaertner		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113203047469
Mailing Address 7 Meadow Ct		Amount of Each Receipt this Period 0.00
City State Zip Code Chatham NJ 07928-1626	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Federal Insurance Company	Occupation Sr Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		P/R Deduction (\$0.00 Semi-Monthly)

<b>C.</b> Full Name (Last, First, Middle Initial) Ann H Zaprazny		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113203137469
Mailing Address 93 Jacobs Creek Dr		Amount of Each Receipt this Period 0.00
City State Zip Code Hershey PA 17033-8915	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Federal Insurance Company	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		P/R Deduction (\$0.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Paul W Franklin		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 27 No. Hillside Avenue		<b>Transaction ID:</b> PR113203327469	
City State Zip Code Chatham NJ 07928	Amount of Each Receipt this Period _____ 44.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 264.00		P/R Deduction (\$22.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B.</b> Alan Carlson		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1 River Court Apt. 2204		<b>Transaction ID:</b> PR113203487469	
City State Zip Code Jersey City NJ 07310-2009	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Federal Insurance Company	Occupation Assistant VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 250.00		P/R Deduction (\$0.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C.</b> Robert S Rafferty		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 34 Drake Rd		<b>Transaction ID:</b> PR113203737469	
City State Zip Code Mendham NJ 07945-1817	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$0.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>44.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Helen A Maksymiuk		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113203907469	
Mailing Address 24 North Court		Amount of Each Receipt this Period 0.00	
City Clifton	State NJ	Zip Code 07013-3213	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Barbara Ring		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113204137469	
Mailing Address 60 Kinnan Way		Amount of Each Receipt this Period 0.00	
City Basking Ridge	State NJ	Zip Code 07920-1831	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Keith R Spalding		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113204477469	
Mailing Address 327 Dodd's Lane		Amount of Each Receipt this Period 0.00	
City Princeton	State NJ	Zip Code 08540-4109	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation SVP/Actuary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

**A.** Full Name (Last, First, Middle Initial)  
Frank Morelli

Mailing Address 20 Dorset Road

City State Zip Code  
Long Valley NJ 07853-3240

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

Name of Employer Federal Insurance Company Occupation Sr Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

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

**Transaction ID:** PR113204737469

Amount of Each Receipt this Period  
40.00

P/R Deduction (\$20.00 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Andrew N Lagravenese

Mailing Address 10 Hill Hollow Court

City State Zip Code  
Clinton NJ 08809-1072

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

Name of Employer Federal Insurance Company Occupation Sr Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

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

**Transaction ID:** PR113204777469

Amount of Each Receipt this Period  
60.00

P/R Deduction (\$30.00 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Robert C Cox

Mailing Address 4 Meeker Road

City State Zip Code  
Basking Ridge NJ 07920-2042

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

Name of Employer Federal Insurance Company Occupation Exec Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

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

**Transaction ID:** PR113205227469

Amount of Each Receipt this Period  
80.00

P/R Deduction (\$40.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>180.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Michael O'reilly		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113205707469	
Mailing Address 870 Ridge View Way		Amount of Each Receipt this Period 250.00	
City Franklin Lakes	State NJ	Zip Code 07417-1524	P/R Deduction (\$125.00 Se- mi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer The Chubb Corporation	Occupation Vice Chair		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas Kerr		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113205787469	
Mailing Address 53 Russling Rd		Amount of Each Receipt this Period 0.00	
City Hackettstown	State NJ	Zip Code 07840-4832	P/R Deduction (\$0.00 Semi- Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Kathleen S Langner		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113205797469	
Mailing Address 81 Sunrise Dr		Amount of Each Receipt this Period 0.00	
City Gillette	State NJ	Zip Code 07933-1940	P/R Deduction (\$0.00 Semi- Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Deborah L Bronson		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113206097469
Mailing Address 9 Cooper Lane		Amount of Each Receipt this Period 34.00
City State Zip Code Millington NJ 07946-1360	FEC ID number of contributing federal political committee. C	
Name of Employer Federal Insurance Company	Occupation Sr Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	
		P/R Deduction (\$17.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B.</b> Gerard M Butler		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113206307469
Mailing Address 1333 Eagle Bend Drive		Amount of Each Receipt this Period 42.00
City State Zip Code Southlake TX 76092	FEC ID number of contributing federal political committee. C	
Name of Employer Federal Insurance Company	Occupation Sr Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
		P/R Deduction (\$21.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C.</b> Edward F Rochford		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113206797469
Mailing Address 27196 Woodbluff Rd.		Amount of Each Receipt this Period 0.00
City State Zip Code Laguna Hills CA 92653-7533	FEC ID number of contributing federal political committee. C	
Name of Employer Federal Insurance Company	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		P/R Deduction (\$0.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	76.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Marc R Hachey		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 8 Southgate Drive		Transaction ID: PR113206927469	
City Annandale	State NJ	Zip Code 08801-3385	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00		
		P/R Deduction (\$21.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B.</b> Marylu Korkuch		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 17 Evergreen Ct.		Transaction ID: PR113207227469	
City Lebanon	State NJ	Zip Code 08833-4105	Amount of Each Receipt this Period 0.00
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C.</b> Thomas J Ganter		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 16 Rustic Way		Transaction ID: PR113207447469	
City Freehold	State NJ	Zip Code 07728-9010	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	92.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. George F Marts</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 37 Fort Hill Drive		<b>Transaction ID: PR113207547469</b>	
City State Zip Code Lloyd Harbor NY 11743-9768	Amount of Each Receipt this Period _____ 82.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 492.00		
		P/R Deduction (\$41.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. Dino E Robusto</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 422 Lenox Avenue		<b>Transaction ID: PR113207847469</b>	
City State Zip Code Westfield NJ 07090-2140	Amount of Each Receipt this Period _____ 82.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Exec Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 492.00		
		P/R Deduction (\$41.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. John J Degnan</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 35 Beacon Hill Drive		<b>Transaction ID: PR113208097469</b>	
City State Zip Code Chester NJ 07930-3013	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice Chair		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1500.00		
		P/R Deduction (\$125.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>414.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Harold L Morrison		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 29 Normandy Court		Transaction ID: PR113208237469	
City Basking Ridge	State NJ	Zip Code 07920-1905	Amount of Each Receipt this Period 0.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Exec Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B.</b> Philip G Folz		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 13 Delaware Drive		Transaction ID: PR113208327469	
City East Brunswick	State NJ	Zip Code 08816-3256	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C.</b> Michele E Twyman		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2378 Apple Ridge Circle		Transaction ID: PR113208717469	
City Manasquan	State NJ	Zip Code 08736-1124	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Amelia C Lynch		Date of Receipt
Mailing Address 12 Leonard Terrace		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Roseland	NJ	07068-3726
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR113208837469
Name of Employer Federal Insurance Company		Amount of Each Receipt this Period
Occupation Sr Vice President		<input type="text"/> 0.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 750.00	P/R Deduction (\$0.00 Semi-Monthly)
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Mark P Korsgaard		Date of Receipt
Mailing Address 64 Knollwood Ave		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Madison	NJ	07940-1746
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR113209227469
Name of Employer Federal Insurance Company		Amount of Each Receipt this Period
Occupation Sr Vice President		<input type="text"/> 42.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 364.00	P/R Deduction (\$21.00 Semi-Monthly)
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Steven R Pozzi		Date of Receipt
Mailing Address 1 Lenore Court		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Long Valley	NJ	07853-3451
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR113209237469
Name of Employer Federal Insurance Company		Amount of Each Receipt this Period
Occupation Sr Vice President		<input type="text"/> 0.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 650.00	P/R Deduction (\$0.00 Semi-Monthly)
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 42.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Michael W O Malley</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 36 Edgemere Terrace		<b>Transaction ID: PR113209647469</b>	
City State Zip Code Washington NJ 07882-4130	Amount of Each Receipt this Period _____ 60.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00		
		P/R Deduction (\$30.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B. Robert A Marzocchi</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 34 Squire Hill Rd		<b>Transaction ID: PR113209857469</b>	
City State Zip Code Long Valley NJ 07853-3223	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C. Julia T Boland</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 45 Redwood Terr		<b>Transaction ID: PR113209917469</b>	
City State Zip Code Flemington NJ 08822-3022	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>110.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Kellie D Phillips		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113210527469	
Mailing Address 20 Stoningham Drive		Amount of Each Receipt this Period 10.00	
City Warren	State NJ	Zip Code 07059-6740	P/R Deduction (\$5.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Assistant VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Kevin J Leidwinger		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113210607469	
Mailing Address 1 Lexington Way		Amount of Each Receipt this Period 0.00	
City Long Valley	State NJ	Zip Code 07853-3266	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Alan C Brown		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113210997469	
Mailing Address 232 Spencer Road		Amount of Each Receipt this Period 0.00	
City Basking Ridge	State NJ	Zip Code 07920-1850	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Christophe N Di Sipio		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113211047469
Mailing Address c/o Expatriate Services Department 15 Mountain View Road		Amount of Each Receipt this Period 70.00
City Warren State NJ Zip Code 07059-6711	Transaction ID: PR113211047469	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 70.00	
Name of Employer Federal Insurance Company Occupation Sr Vice President	P/R Deduction (\$35.00 Semi-Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 420.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Christoph Ritterson		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113211497469
Mailing Address 1846 Stockton Drive		Amount of Each Receipt this Period 60.00
City Northfield State IL Zip Code 60093-3243	Transaction ID: PR113211497469	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 60.00	
Name of Employer Federal Insurance Company Occupation Sr Vice President	P/R Deduction (\$30.00 Semi-Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 288.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Edward J Radzinski		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113211587469
Mailing Address 4 Village Ct		Amount of Each Receipt this Period 0.00
City Flemington State NJ Zip Code 08822-1532	Transaction ID: PR113211587469	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 0.00	
Name of Employer Federal Insurance Company Occupation Sr Vice President	P/R Deduction (\$0.00 Semi-Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	130.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Maureen B Waterbury</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 48 Countryside Drive		<b>Transaction ID: PR113211617469</b>	
City State Zip Code Basking Ridge NJ 07920-2030	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$0.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Timothy J Farr</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5839 Grand Reunion Dr		<b>Transaction ID: PR113211807469</b>	
City State Zip Code Hoschton GA 30548-4103	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 301.00		P/R Deduction (\$0.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Mark James</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 25 Walnut Circle		<b>Transaction ID: PR113211937469</b>	
City State Zip Code Basking Ridge NJ 07920-1022	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$0.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Conway		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113212627469	
Mailing Address 1221 24th Street, NW Apt. 303		Amount of Each Receipt this Period 0.00	
City Washington      State DC      Zip Code 20037-1132	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Federal Insurance Company      Occupation Sr Vice President	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$0.00 Semi-Monthly)		

<b>B.</b> Full Name (Last, First, Middle Initial) John P Smith		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113212737469	
Mailing Address 53 S Alward Ave		Amount of Each Receipt this Period 0.00	
City Basking Ridge      State NJ      Zip Code 07920-1814	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Federal Insurance Company      Occupation Vice President	Aggregate Year-to-Date ▼ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$0.00 Semi-Monthly)		

<b>C.</b> Full Name (Last, First, Middle Initial) Baxter W Graham		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113212887469	
Mailing Address 84 Beekman Road		Amount of Each Receipt this Period 60.00	
City Summit      State NJ      Zip Code 07901-1723	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Federal Insurance Company      Occupation Sr Vice President	Aggregate Year-to-Date ▼ 444.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$30.00 Semi-Monthly)		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Nancy D Pate-Nelson		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113213417469
Mailing Address 1015 41st Avenue North		Amount of Each Receipt this Period 0.00
City State Zip Code St. Petersburg FL 33703-4529	FEC ID number of contributing federal political committee. C	P/R Deduction (\$0.00 Semi-Monthly)
Name of Employer Federal Insurance Company	Occupation Sr Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Marjorie D Raines		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113213437469
Mailing Address 7 Young's Rd.		Amount of Each Receipt this Period 100.00
City State Zip Code Basking Ridge NJ 07920-4024	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Federal Insurance Company	Occupation Exec Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 536.00	

Full Name (Last, First, Middle Initial) <b>C.</b> D Scott Dalton		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113213747469
Mailing Address 3716 Langley Oaks Place		Amount of Each Receipt this Period 40.00
City State Zip Code Marietta GA 30067-4980	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Federal Insurance Company	Occupation Sr Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	140.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 / 55
<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Michelle D Middleton Mailing Address 30 Southgate Drive City Annandale State NJ Zip Code 08801-3386 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113213957469 Amount of Each Receipt this Period 42.00 P/R Deduction (\$21.00 Semi-Monthly)
Name of Employer Federal Insurance Company Occupation Sr Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Keith D Marks Mailing Address 2s163 Stratford Road City Glen Ellyn State IL Zip Code 60137-6831 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113214517469 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Federal Insurance Company Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Terrence W Cavanaugh Mailing Address 35 Brookrace Drive City Mendham State NJ Zip Code 07945-2930 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113214537469 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Federal Insurance Company Occupation Sr Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>182.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

**A.** Full Name (Last, First, Middle Initial)  
Gregory P Barabas

Mailing Address 5 Meadow Lane

City Annandale State NJ Zip Code 08801-3423

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

Name of Employer Federal Insurance Company Occupation Sr Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

**Transaction ID:** PR113214607469

Amount of Each Receipt this Period  
0.00

P/R Deduction (\$0.00 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Timothy J Szerlong

Mailing Address 1320 Longmeadow Lane

City Lake Forest State IL Zip Code 60045-1571

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

Name of Employer Federal Insurance Company Occupation Sr Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

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

**Transaction ID:** PR113214967469

Amount of Each Receipt this Period  
0.00

P/R Deduction (\$0.00 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
James R Hamilton

Mailing Address 17401 W. 135th Street

City Lockport State IL Zip Code 60441-7456

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

Name of Employer Federal Insurance Company Occupation Sr Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

**Transaction ID:** PR113215097469

Amount of Each Receipt this Period  
60.00

P/R Deduction (\$30.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Raymond C O'byrne		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113215257469	
Mailing Address 22 Roberts Road		Amount of Each Receipt this Period 46.00	
City Warren      State NJ      Zip Code 07059-5205	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Federal Insurance Company      Occupation Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 276.00		
		P/R Deduction (\$23.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B.</b> James D Butchart		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113215787469	
Mailing Address 8890 Niblick Dr		Amount of Each Receipt this Period 0.00	
City Alpharetta      State GA      Zip Code 30022-6837	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Federal Insurance Company      Occupation Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C.</b> Perry S Granof		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113215837469	
Mailing Address 1147 Longmeadow Lane		Amount of Each Receipt this Period 0.00	
City Glencoe      State IL      Zip Code 60022-1022	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Federal Insurance Company      Occupation Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	46.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	46.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Gail W Soja		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113216137469	
Mailing Address 36 Edgehill Avenue		Amount of Each Receipt this Period 0.00	
City Chatham	State NJ	Zip Code 07928-1937	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Jeffery A Neighbors		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113216467469	
Mailing Address 4421 Ironwood Drive		Amount of Each Receipt this Period 0.00	
City Flower Mound	State TX	Zip Code 75028-1657	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Lisa A Wood Teleha		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113216817469	
Mailing Address 6630 Pemberton Drive		Amount of Each Receipt this Period 0.00	
City Dallas	State TX	Zip Code 75230-4131	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Assistant VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Margaret A Klose		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 803 Country Club Rd		Transaction ID: PR113217387469	
City Bridgewater	State NJ	Zip Code 08807-1124	Amount of Each Receipt this Period 0.00
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B.</b> Paul J Krump		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4 Chestnut Glen Ct		Transaction ID: PR113217607469	
City Mendham	State NJ	Zip Code 07945-2731	Amount of Each Receipt this Period 0.00
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Exec Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C.</b> Deanne K Gordon		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 11103 Tupper Lake		Transaction ID: PR113217647469	
City Houston,	State TX	Zip Code 77042-1320	Amount of Each Receipt this Period 0.00
FEC ID number of contributing federal political committee. C			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Janice C Tomlinson		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 322 South Finley Avenue 15 Mt View Rd		<b>Transaction ID:</b> PR113217707469
City Basking Ridge	State NJ	Zip Code 07920-1527
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 70.00
Name of Employer Federal Insurance Company	Occupation Exec Vice President	P/R Deduction (\$35.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Kirk O Bailey		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 5119 E. 108th Street		<b>Transaction ID:</b> PR113217717469
City Tulsa	State OK	Zip Code 74137-7242
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 0.00
Name of Employer Federal Insurance Company	Occupation Vice President	P/R Deduction (\$0.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Joel M Tealer		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 135 Riverwoods Dr.		<b>Transaction ID:</b> PR113217977469
City New Hope	State PA	Zip Code 18938-2226
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 0.00
Name of Employer Federal Insurance Company	Occupation Sr Vice President	P/R Deduction (\$0.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 55
	<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)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Jill A Abere		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113218087469	
Mailing Address 1829 SW Joshua Street		Amount of Each Receipt this Period 0.00	
City State Zip Code Portland OR 97219-7784	FEC ID number of contributing federal political committee. C		
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>B.</b> Clifton E Thomas		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113218257469	
Mailing Address 4120 Lethram Ct		Amount of Each Receipt this Period 0.00	
City State Zip Code Pleasanton CA 94588-3685	FEC ID number of contributing federal political committee. C		
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
		P/R Deduction (\$0.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) <b>C.</b> Paul L Lewis		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113218467469	
Mailing Address 64 blazier rd		Amount of Each Receipt this Period 62.00	
City State Zip Code Martinsville NJ 08836-2041	FEC ID number of contributing federal political committee. C		
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		
		P/R Deduction (\$31.00 Semi-Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	62.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Cynthia Zegel</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4444 Hazelbrook Ave		<b>Transaction ID: PR113218707469</b>	
City State Zip Code Long Beach CA 90808-1344	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$0.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Luis A Granados</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 36 Halstead St.		<b>Transaction ID: PR113219057469</b>	
City State Zip Code Clinton NJ 08809-1307	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		P/R Deduction (\$20.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Michael A Slor</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9898 N131st Street		<b>Transaction ID: PR113219107469</b>	
City State Zip Code Scottsdale AZ 85259	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$0.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>40.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Valerie A Aguirre</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 604 Emerald Trail		<b>Transaction ID: PR113219337469</b>	
City State Zip Code Martinsville, NJ 08836-2347	Amount of Each Receipt this Period _____ 42.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 252.00		P/R Deduction (\$21.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Kevin G Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9807 Sierra Trail		<b>Transaction ID: PR113219377469</b>	
City State Zip Code Eden Prairie, MN 55347-3235	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		P/R Deduction (\$20.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Carol D Kuluva</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 15142 Tuba St		<b>Transaction ID: PR113219427469</b>	
City State Zip Code Mission Hills, CA 91345-2749	Amount of Each Receipt this Period _____ 0.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer Federal Insurance Company	Occupation Exec Litig Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.00		P/R Deduction (\$0.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>82.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 55		
	<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

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A.</b> Stephen A Fuller		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113219577469	
Mailing Address 10619 Great Arbor Drive		Amount of Each Receipt this Period 0.00	
City Potomac	State MD	Zip Code 20854-4220	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Phillip C Demmel		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113219637469	
Mailing Address 1514Mission Ridge Trail		Amount of Each Receipt this Period 40.00	
City Carrollton	State TX	Zip Code 75007	P/R Deduction (\$20.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Paul J Butler		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR113219667469	
Mailing Address 74 Glattly Drive		Amount of Each Receipt this Period 0.00	
City Denville	State NJ	Zip Code 07834-3837	P/R Deduction (\$0.00 Semi-Monthly)
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	40.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 / 55						
	(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

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Jacquelyn C Strobel</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 140 Pierce Blvd		<b>Transaction ID: PR113224707469</b>	
City Windsor	State CT	Zip Code 06095-1711	Amount of Each Receipt this Period _____ 0.00
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$0.00 Semi-Monthly)	
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 325.00		

Full Name (Last, First, Middle Initial) <b>B. Mark D Gatliff</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9431 Weatherly Drive		<b>Transaction ID: PR113224757469</b>	
City Brentwood	State TN	Zip Code 37027-2612	Amount of Each Receipt this Period _____ 0.00
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$0.00 Semi-Monthly)	
Name of Employer Federal Insurance Company	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mark L Berthiaume</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 170 Old Turnpike Road		<b>Transaction ID: PR113225537469</b>	
City Califon	State NJ	Zip Code 07830-3034	Amount of Each Receipt this Period _____ 70.00
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$35.00 Semi-Monthly)	
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>70.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

<b>A.</b> Full Name (Last, First, Middle Initial) C Scott Gunter		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2905 Eastbourne Lane		<b>Transaction ID:</b> PR113225547469	
City State Zip Code Flower Mound TX 75022-0901	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Semi-Monthly)		
Name of Employer Federal Insurance Company	Occupation Sr Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

<b>B.</b> Full Name (Last, First, Middle Initial) John D Finnegan		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 563 Miller Court		<b>Transaction ID:</b> PR113251287469	
City State Zip Code Wyckoff NJ 07481-1147	Amount of Each Receipt this Period 0.00		
FEC ID number of contributing federal political committee. C	P/R Deduction (\$0.00 Semi-Monthly)		
Name of Employer The Chubb Corporation	Occupation Chairman/Pres/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	40.00
<b>TOTAL</b> This Period (last page this line number only) .....	8072.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Jerry Weller for Congress</b>		<b>Transaction ID: 15688466</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 1155 21st Street, NW, Suite 330		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20036		
Purpose of Disbursement Candidate Name Gerald Weller Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 11	011 Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. Conrad Burns (DC-R)</b>		<b>Transaction ID: 15688493</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 187 Dirksen Sen Ofc Bldg		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20510		
Purpose of Disbursement Candidate Name Conrad Burns Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District: 2	011 Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. Santorum 2006</b>		<b>Transaction ID: 15688463</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address One Tower Bridge Suite 1440		Amount of Each Disbursement this Period 1000.00
City West Conshohocken State PA Zip Code 19428		
Purpose of Disbursement Candidate Name Rick Santorum Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 2	011 Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Pomeroy for Congress</b>		<b>Transaction ID: 15688439</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address Post Office Box 75214		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20013	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Earl Pomeroy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Pallone For Congress</b>		<b>Transaction ID: 15688472</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 3176		Amount of Each Disbursement this Period 1000.00
City Long Branch State NJ Zip Code 07740	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Frank Pallone		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Committee to Re-Elect Congressman Ed Towns</b>		<b>Transaction ID: 15688453</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 438 Lewis Avenue		Amount of Each Disbursement this Period 1000.00
City Brooklyn State NY Zip Code 11233	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Edolphus Towns		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 10	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Chris Cannon for Congress</b>		<b>Transaction ID: 15686750</b> Date of Disbursement 06 / 28 / 2006
Mailing Address P.O. Box 16021		Amount of Each Disbursement this Period 2000.00
City Alexandria State VA Zip Code 22302	Purpose of Disbursement 011 Category/Type	
Candidate Name Christopher Cannon	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. The Blue Dog PAC</b>		<b>Transaction ID: 15688441</b> Date of Disbursement 06 / 28 / 2006
Mailing Address 236 Massachusetts Avenue, NE Suite 508		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20002	Purpose of Disbursement 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Ensign for Senate</b>		<b>Transaction ID: 15688451</b> Date of Disbursement 06 / 28 / 2006
Mailing Address 8917 Stafford Springs Drive		Amount of Each Disbursement this Period 2000.00
City Las Vegas State NV Zip Code 89134	Purpose of Disbursement 011 Category/Type	
Candidate Name John Ensign	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Tiberi for Congress</b>		<b>Transaction ID: 15688477</b>	
Mailing Address 2021 East Dublin Granville Road Suite 2000		Date of Disbursement 06 / 28 / 2006	
City Columbus	State OH	Zip Code 43229	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Patrick Tiberi			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH	District: 12		

Full Name (Last, First, Middle Initial) <b>B. Scott Garrett for Congress</b>		<b>Transaction ID: 15688490</b>	
Mailing Address PO Box 905		Date of Disbursement 06 / 28 / 2006	
City Newton	State NJ	Zip Code 07860	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Scott Garrett			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ	District: 5		

Full Name (Last, First, Middle Initial) <b>C. Renzi for Congress</b>		<b>Transaction ID: 15688458</b>	
Mailing Address P.O. Box 219		Date of Disbursement 06 / 28 / 2006	
City Flagstaff	State AZ	Zip Code 86002	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rick Renzi			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AZ	District: 1		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Geoff Davis For Congress</b>		<b>Transaction ID: 15688445</b> Date of Disbursement
Mailing Address 3161 Dixie Highway Suite F		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>
City Erlanger	State KY	Zip Code 41018
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="2000.00"/>
Candidate Name Rep. Geoffrey Davis		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY	District: 4	

Full Name (Last, First, Middle Initial) <b>B. Rush Holt For Congress</b>		<b>Transaction ID: 15688470</b> Date of Disbursement
Mailing Address PO Box 782		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>
City Pennington	State NJ	Zip Code 08534
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Rep. Rush Holt		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 12	

Full Name (Last, First, Middle Initial) <b>C. Mchenry For Congress</b>		<b>Transaction ID: 15688473</b> Date of Disbursement
Mailing Address PO Box 1406		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>
City Hickory	State NC	Zip Code 28601
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Rep. Patrick McHenry		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 10	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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

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NAME OF COMMITTEE (In Full)  
The Chubb Corporation Political Action Committee-CHUBBPAC

Full Name (Last, First, Middle Initial) <b>A. Pascrell For Congress Inc.</b>		<b>Transaction ID: 15688481</b>	
Mailing Address Pob 640		Date of Disbursement 06 / 28 / 2006	
City Totowa	State NJ	Zip Code 07511	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011	Category/ Type
Candidate Name Rep. William Pascrell, Jr.			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ	District: 8		

Full Name (Last, First, Middle Initial) <b>B. Matheson For Congress</b>		<b>Transaction ID: 15688487</b>	
Mailing Address 677 South 200 West Suite A		Date of Disbursement 06 / 28 / 2006	
City Salt Lake City	State UT	Zip Code 84101	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011	Category/ Type
Candidate Name Rep. James Matheson			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: UT	District: 2		

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

2000.00

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

21500.00