

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 169
	<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	<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 Travelers Companies Inc. Political Action Committee (T-PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Ross, Patricia, A, ,			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2018"/>
City Hartford	State CT	Zip Code 06183	Transaction ID : A2018-1088397
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="33.85"/>
Name of Employer (for Individual) Travelers Indemnity Co		Occupation (for Individual) 2VP Project Management	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="366.12"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rowland, David, D, ,			Date of Receipt
Mailing Address 385 Washington Street			<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2018"/>
City St. Paul	State MN	Zip Code 55102	Transaction ID : A2018-951050
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) Travelers Indemnity Co		Occupation (for Individual) EVP Fixed Income Investments	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="900.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rowland, David, D, ,			Date of Receipt
Mailing Address 385 Washington Street			<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2018"/>
City St. Paul	State MN	Zip Code 55102	Transaction ID : A2018-1087968
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) Travelers Indemnity Co		Occupation (for Individual) EVP Fixed Income Investments	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="233.85"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>