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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) The Travelers Companies, Inc. Political Action Committee (T-PAC) One Tower Square ADDRESS (number and street) (Check if address is changed) Hartford 06183 CT CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS fecinfo@pass1.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00376376 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Frank, Lindsay, , , Type or Print Name of Treasurer Frank, Lindsay, , , [Electronically Filed] 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	raye z
Can	didate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Par	ty Con	nmittee:	(5)
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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	rite or Type Comm		T DAC)
		lers Companies, Inc. Political Action Committee (,
6.	-	nnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
	ne Travelers (Companies Inc.	
	Mailing Address	One Tower Square	
		Hartford CT 06183	
		CITY STATE ZIF	P CODE
	Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leade	ership PAC Sponsor
	Custodian of Rec books and records	cords: Identify by name, address (phone number optional) and position of the person in posses.	ssion of committee
	Full Name	Frank, Lindsay, , ,	1
		One Tower Square	
	Mailing Address		
		Hartford , CT , 06183	
	Title or Position	CITY STATE ZIF	CODE
	Custodian of Rec	ords	7 9543
		e name and address (phone number optional) of the treasurer of the committee; and the name ent (e.g., assistant treasurer).	and address of
	I	Frank, Lindsay, , ,	1
	of Treasurer L	One Tower Square	
	Mailing Address		
		L Hortford	
		Hartford CT 06183 CITY STATE ZIP	CODE
	Title or Position Treasurer	Telephone number 860 - 277	

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Full Name of Designated Agent	Mulcahy, Ann, , ,	
Mailing Address	One Tower Square	
	Hartford CT 06183	
Title or Desition	CITY STATE	ZIP CODE
Title or Position Assistant Treas	surer Telephone number 860 –	277 - 7649
Name of Bank, I	oxes or maintains funds. Depository, etc.	
Name of Bank, I	Depository, etc. Bank of America 777 Main Street	
	Depository, etc. Bank of America 777 Main Street	
Name of Bank, I	Depository, etc. Bank of America 777 Main Street	
Name of Bank, I	Depository, etc. Bank of America 7777 Main Street	ZIP CODE
Name of Bank, I	Depository, etc. Bank of America 777 Main Street Hartford CITY STATE	ZIP CODE
Name of Bank, I	Depository, etc. Bank of America 777 Main Street Hartford CITY STATE	
Name of Bank, I	Depository, etc. Bank of America 7777 Main Street	
Name of Bank, I	Depository, etc. Bank of America 7777 Main Street	
Name of Bank, I	Depository, etc. Bank of America 7777 Main Street	

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Form/Schedule: F1A
Transaction ID:

This amended registration is being filed to update the committee's Treasurer and Assistant Treasurer. Please make the necessary changes to your records.

Form/Schedule: Transaction ID: