

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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. Gifford, Bruce, R, ,

Mailing Address One Tower Square

City
Hartford

State
CT

Zip Code
06183

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Travelers Indemnity Co

Occupation (for Individual)
SVP & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2019

Transaction ID : A2019-1088290

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Goldberg, Jeff, C, ,

Mailing Address Suite 800
161 N Clark Street

City
Chicago

State
IL

Zip Code
60601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Travelers Indemnity Co

Occupation (for Individual)
Sr Counsel Claim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2019

Transaction ID : A2019-902652

Amount of Each Receipt this Period

29.12

☐ Memo Item

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

C. Goldberg, Jeff, C, ,

Mailing Address Suite 800
161 N Clark Street

City
Chicago

State
IL

Zip Code
60601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Travelers Indemnity Co

Occupation (for Individual)
Sr Counsel Claim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

314.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2019

Transaction ID : A2019-1088151

Amount of Each Receipt this Period

29.12

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

83.24