

# 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 St. Paul Travelers Companies Inc. PAC

ADDRESS (number and street) One Tower Square  
 Check if different than previously reported. (ACC)  
Hartford CT 06183

2. **FEC IDENTIFICATION NUMBER** C00376376  
**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 01 01 2007 through 01 31 2007

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 John L. Mangino

Signature of Treasurer Electronically Filed by John L. Mangino Date 02 15 2007

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
The St. Paul Travelers Companies Inc. PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		111896.22
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	111896.22									
(c) Total Receipts (from Line 19) .....	39730.82	39730.82								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	151627.04	151627.04								
7. Total Disbursements (from Line 31) .....	34900.00	34900.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	116727.04	116727.04								
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 St. Paul Travelers Companies Inc. PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	6190.28	6190.28
(i) Itemized (use Schedule A) .....	33540.54	33540.54
(ii) Unitemized .....	39730.82	39730.82
(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) .....	39730.82	39730.82
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
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)) .....	39730.82	39730.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	39730.82	39730.82

**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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27500.00	27500.00
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.....	7400.00	7400.00
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))..	34900.00	34900.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	34900.00	34900.00

**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) .....	39730.82	39730.82
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	39730.82	39730.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	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 6 / 22
	<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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> John J Albano		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address One Tower Square		<b>Transaction ID:</b> A2007-18468	
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 208.33		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co	Occupation EVP Commercial Lines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33		

Full Name (Last, First, Middle Initial) <b>B.</b> John J Albano		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		<b>Transaction ID:</b> A2007-51267	
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 208.33		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co	Occupation EVP Commercial Lines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.66		

Full Name (Last, First, Middle Initial) <b>C.</b> Jay S Benet		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address One Tower Square		<b>Transaction ID:</b> A2007-18705	
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 239.58		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co	Occupation Vice Chairman & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.58		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	656.24
<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 / 22
	<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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Jay S Benet</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address One Tower Square		<b>Transaction ID: A2007-51503</b>
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 239.58	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Travelers Indemnity Co	Occupation Vice Chairman & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 479.16	

Full Name (Last, First, Middle Initial) <b>B. Diane D Bengston</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address One Tower Square		<b>Transaction ID: A2007-51452</b>
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 104.17	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Travelers Indemnity Co	Occupation SVP HR Gen Coml and Per Lines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.34	

Full Name (Last, First, Middle Initial) <b>C. Andy F Bessette</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 385 Washington Street		<b>Transaction ID: A2007-51737</b>
City State Zip Code St. Paul MN 55102	Amount of Each Receipt this Period 166.67	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Travelers Indemnity Co	Occupation EVP Chief Admin Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.34	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	510.42
<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 / 22
	<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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> William Bloom		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		Transaction ID: A2007-51246	
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 158.85		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co	Occupation Chief Information Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.70		

Full Name (Last, First, Middle Initial) <b>B.</b> Timothy R Campbell		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		Transaction ID: A2007-51403	
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 114.58		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co	Occupation SVP Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.16		

Full Name (Last, First, Middle Initial) <b>C.</b> James W Chapman		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		Transaction ID: A2007-51183	
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 117.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co	Occupation President National Property		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.38		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	390.62
<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 / 22
	<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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Charles J Clarke		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address One Tower Square		Transaction ID: A2007-18461	
City State Zip Code Hartford CT 06183		Amount of Each Receipt this Period 312.50	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co		Occupation Vice Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.50	

Full Name (Last, First, Middle Initial) <b>B.</b> Charles J Clarke		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		Transaction ID: A2007-51259	
City State Zip Code Hartford CT 06183		Amount of Each Receipt this Period 312.50	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co		Occupation Vice Chairman	
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>C.</b> John P Clifford Jr		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address 385 Washington Street		Transaction ID: A2007-51459	
City State Zip Code St. Paul MN 55102		Amount of Each Receipt this Period 156.25	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co		Occupation SVP Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	781.25
<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 / 22
	<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 St. Paul Travelers Companies Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
William E Cunningham Jr

Mailing Address One Tower Square

City State Zip Code  
Hartford CT 06183

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

Name of Employer  
Travelers Indemnity Co

Occupation  
President National Accts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 3 1 / 2 0 0 7

**Transaction ID:** A2007-51484

Amount of Each Receipt this Period  
187.50

**B.** Full Name (Last, First, Middle Initial)  
Irwin R Ettinger

Mailing Address Suite 400

City State Zip Code  
New York City NY 10017-2630

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

Name of Employer  
Travelers Indemnity Co

Occupation  
Vice Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.34

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 3 1 / 2 0 0 7

**Transaction ID:** A2007-51489

Amount of Each Receipt this Period  
166.67

**C.** Full Name (Last, First, Middle Initial)  
Clyde H Fitch Jr

Mailing Address One Tower Square

City State Zip Code  
Hartford CT 06183

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

Name of Employer  
Travelers Indemnity Co

Occupation  
SVP Agency Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 3 1 / 2 0 0 7

**Transaction ID:** A2007-51551

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	479.17
<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 / 22
	<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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Marlyss J Gage		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		<b>Transaction ID:</b> A2007-51190	
City State Zip Code Hartford CT 06183		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co		Occupation SVP Prod Mgmt Unit & CUO	
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>B.</b> William H Heyman		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address 385 Washington Street		<b>Transaction ID:</b> A2007-18471	
City State Zip Code St. Paul MN 55102		Amount of Each Receipt this Period 239.58	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co		Occupation Vice Chairman Chief Inv Offcr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 239.58	

Full Name (Last, First, Middle Initial) <b>C.</b> William H Heyman		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address 385 Washington Street		<b>Transaction ID:</b> A2007-51270	
City State Zip Code St. Paul MN 55102		Amount of Each Receipt this Period 239.58	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co		Occupation Vice Chairman Chief Inv Offcr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 479.16	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	604.16
<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 / 22
	<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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Michael F Klein</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address 385 Washington Street		<b>Transaction ID: A2007-51458</b>	
City State Zip Code St. Paul MN 55102	Amount of Each Receipt this Period 145.83		
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation SVP Specialty		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.66		

Full Name (Last, First, Middle Initial) <b>B. Thomas M Kunkel</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		<b>Transaction ID: A2007-51387</b>	
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 109.37		
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation President Bond		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.74		

Full Name (Last, First, Middle Initial) <b>C. Joseph P Lacher Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address One Tower Square		<b>Transaction ID: A2007-18753</b>	
City State Zip Code Hartford CT 06183	Amount of Each Receipt this Period 208.33		
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation EVP & CEO Personal Lines		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	463.53
<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 / 22
	<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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Joseph P Lacher Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		<b>Transaction ID: A2007-51550</b>	
City State Zip Code Hartford CT 06183		Amount of Each Receipt this Period 208.33	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co		Occupation EVP & CEO Personal Lines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.66	

Full Name (Last, First, Middle Initial) <b>B. Samuel Liss</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address Suite 400		<b>Transaction ID: A2007-18750</b>	
City State Zip Code New York City NY 10017-2630		Amount of Each Receipt this Period 229.17	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co		Occupation EVP Strategic Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 229.17	

Full Name (Last, First, Middle Initial) <b>C. Samuel Liss</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address Suite 400		<b>Transaction ID: A2007-51547</b>	
City State Zip Code New York City NY 10017-2630		Amount of Each Receipt this Period 229.17	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co		Occupation EVP Strategic Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 458.34	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	666.67
<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 14 / 22
	<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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Terry F Lukow		Date of Receipt MM / DD / YYYY 01 / 31 / 2007
Mailing Address One Tower Square		<b>Transaction ID:</b> A2007-51681
City State Zip Code Hartford CT 06183	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 104.17
Name of Employer Travelers Indemnity Co	Occupation VP Surety Construction Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.34	

Full Name (Last, First, Middle Initial) <b>B.</b> Brian MacLean		Date of Receipt MM / DD / YYYY 01 / 12 / 2007
Mailing Address One Tower Square		<b>Transaction ID:</b> A2007-18698
City State Zip Code Hartford CT 06183	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 291.67
Name of Employer Travelers Indemnity Co	Occupation EVP Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.67	

Full Name (Last, First, Middle Initial) <b>C.</b> Brian MacLean		Date of Receipt MM / DD / YYYY 01 / 31 / 2007
Mailing Address One Tower Square		<b>Transaction ID:</b> A2007-51496
City State Zip Code Hartford CT 06183	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 291.67
Name of Employer Travelers Indemnity Co	Occupation EVP Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 583.34	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	687.51
<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 15 / 22
	<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 St. Paul Travelers Companies Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Maria Olivo		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address Suite 400		<b>Transaction ID:</b> A2007-51372	
City State Zip Code New York City NY 10017-2630		Amount of Each Receipt this Period 187.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co		Occupation EVP Investor Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Douglas K Russell		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		<b>Transaction ID:</b> A2007-51742	
City State Zip Code Hartford CT 06183		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co		Occupation SVPCor Controller&Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Marc E Schmittlein		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address One Tower Square		<b>Transaction ID:</b> A2007-51377	
City State Zip Code Hartford CT 06183		Amount of Each Receipt this Period 109.37	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co		Occupation President Select	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 218.74	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	421.87
<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 / 22
	<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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Kenneth F Spence III		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address 385 Washington Street		<b>Transaction ID:</b> A2007-18788	
City State Zip Code St. Paul MN 55102		Amount of Each Receipt this Period 202.96	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co		Occupation EVP General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.96	

Full Name (Last, First, Middle Initial) <b>B.</b> Kenneth F Spence III		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address 385 Washington Street		<b>Transaction ID:</b> A2007-51585	
City State Zip Code St. Paul MN 55102		Amount of Each Receipt this Period 200.88	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co		Occupation EVP General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 403.84	

Full Name (Last, First, Middle Initial) <b>C.</b> Daniel T Yin		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address Suite 400		<b>Transaction ID:</b> A2007-51717	
City State Zip Code New York City NY 10017-2630		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Travelers Indemnity Co		Occupation SVP Investment Mgr Relations	
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) ..... ▶	528.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	6190.28

**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)

PAGE 17 / 22

<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

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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Synergy PAC</b>		Transaction ID: B161834 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 7
Mailing Address 6849 Old Dominion Drive Suite 222		Amount of Each Disbursement this Period 5000.00
City Mclean State VA Zip Code 22101	Purpose of Disbursement O-2007 Federal PAC US Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	011 Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Northstar Leadership PAC</b>		Transaction ID: B161835 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 7
Mailing Address P.O. Box 28754		Amount of Each Disbursement this Period 1000.00
City St. Paul State MN Zip Code 55128	Purpose of Disbursement O-2007 Federal PAC US Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	011 Category/ Type

Full Name (Last, First, Middle Initial) <b>C. CHRIS PAC</b>		Transaction ID: B161830 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 7
Mailing Address 607 14th Street NW - Suite 800		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20005	Purpose of Disbursement O-2007 Federal PAC US Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	011 Category/ Type

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

11000.00

**TOTAL** 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)

PAGE 18 / 22

<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

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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. American Insurance Assoc. Federal PAC</b>		<b>Transaction ID: B161831</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 7
Mailing Address 1130 Connecticut Ave. NW #1000		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20036	011 Category/ Type	
Purpose of Disbursement O-2007 Federal PAC US		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>B. McConnell Senate Committee</b>		<b>Transaction ID: B161983</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 400 N. Capitol Street NW Suite 585		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20001	011 Category/ Type	
Purpose of Disbursement G-2008 U.S. Senate KY		
Candidate Name Mitch McConnell		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends for Harry Reid</b>		<b>Transaction ID: B161984</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 426 C Street NE Rear Building		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement P-2010 U.S. Senate NV		
Candidate Name Harry Reid		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<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)

PAGE 19 / 22

<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

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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Donnelly for Congress</b>		Transaction ID: B162256 Date of Disbursement 01 / 29 / 2007	
Mailing Address 499 South Capitol Street SW Suite		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement P-2008 U.S. House 02 IN	011 Category/ Type	
Candidate Name Joseph Donnelly	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 02			

Full Name (Last, First, Middle Initial) <b>B. Ellen Tauscher for Congress</b>		Transaction ID: B162257 Date of Disbursement 01 / 29 / 2007	
Mailing Address 422 C Street NE - Lower Level		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement P-2008 U.S. House 10 CA	011 Category/ Type	
Candidate Name Ellen O Tauscher	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 10			

Full Name (Last, First, Middle Initial) <b>C. More Conservatives PAC (McPAC)</b>		Transaction ID: B162258 Date of Disbursement 01 / 29 / 2007	
Mailing Address 675 North Washington Street #410		Amount of Each Disbursement this Period 1000.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement O-2007 Federal PAC VA	011 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: VA District:	Not Applicable		

<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)

PAGE 20 / 22

<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

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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Hodes for Congress</b>		Transaction ID: B162259 Date of Disbursement 01 / 29 / 2007	
Mailing Address 301 14th Street NE		Amount of Each Disbursement this Period 1000.00	
City Washington	State DC	Zip Code 20002	011 Category/ Type
Purpose of Disbursement P-2008 U.S. House 02 NH			
Candidate Name Paul W Hodes			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NH	District: 02		

Full Name (Last, First, Middle Initial) <b>B. Richard E. Neal for Congress Cmte.</b>		Transaction ID: B162260 Date of Disbursement 01 / 29 / 2007	
Mailing Address P.O. Box 15906		Amount of Each Disbursement this Period 1000.00	
City Chevy Chase	State MD	Zip Code 20825	011 Category/ Type
Purpose of Disbursement P-2008 U.S. House 02 MA			
Candidate Name Richard E Neal			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MA	District: 02		

Full Name (Last, First, Middle Initial) <b>C. Matheson for Congress</b>		Transaction ID: B143514 Date of Disbursement 01 / 30 / 2007	
Mailing Address 677 South 200 West Suite A		Amount of Each Disbursement this Period -1000.00	
City Salt Lake City	State UT	Zip Code 84101	011 Category/ Type
Purpose of Disbursement P-2006 U.S. House 02 UT			
Candidate Name Jim Matheson			
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: UT	District: 02		

Check Voided. Originally reported on the FEC 2006 July Monthly.

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	27500.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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 St. Paul Travelers Companies Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Virginia AIA PAC</b>		<b>Transaction ID: B156464</b> Date of Disbursement 01 / 05 / 2007
Mailing Address P.O. Box 1122		Amount of Each Disbursement this Period 2500.00
City Richmond State VA Zip Code 23218	Purpose of Disbursement O-2007 State PAC VA Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>B. American Ins. Assoc. State Individual PAC</b>		<b>Transaction ID: B161832</b> Date of Disbursement 01 / 15 / 2007
Mailing Address 1130 Connecticut Ave. NW #1000		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20036	Purpose of Disbursement O-2007 State PAC US Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>C. Friends of Sally Jameson</b>		<b>Transaction ID: B142922</b> Date of Disbursement 01 / 30 / 2007
Mailing Address P. O. Box 333		Amount of Each Disbursement this Period -100.00
City Bryantown State MD Zip Code 20617	Purpose of Disbursement G-2006 State House 28 MD Candidate Name Sally Young Jameson Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 28	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Check Voided. Originally reported on FEC 2006 July Monthly.

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	7400.00

Image# 27960056725

Form/Schedule: SA11A1

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

\*\*\*\*\*