

**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 68 OF 92
	<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 Travelers Companies Inc. Political Action Committee (T-PAC)**

**A. Russell, Douglas, K, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One Tower Square

City Hartford	State CT	Zip Code 06183
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Travelers Indemnity Co	Occupation (for Individual) SVP Corporate Controller
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3158.70

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : A2018-2218894**

Amount of Each Receipt this Period  
153.85

Memo Item

**B. Ryczek, Ellen, S, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One Tower Square

City Hartford	State CT	Zip Code 06183
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Travelers Indemnity Co	Occupation (for Individual) 2VP Bond & SI Claim Ops
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : A2018-2218896**

Amount of Each Receipt this Period  
33.65

Memo Item

**C. Rynda, Scott, W, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 385 Washington Street

City St. Paul	State MN	Zip Code 55102
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Travelers Indemnity Co	Occupation (for Individual) SVP Corporate Tax
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : A2018-2218603**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	207.50
<b>TOTAL</b> This Period (last page this line number only).....	