

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 190 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The Travelers Companies, Inc. Political Action Committee (T-PAC)

Full Name (Last, First, Middle Initial) A. Ellen M Rizzo			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-2437190
Hartford	CT	06183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="132.69"/>
Name of Employer	Occupation		
Travelers Indemnity Co	SVP ClaimShrdSvcs & CFO Claim		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2996.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ellen M Rizzo			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-2565357
Hartford	CT	06183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="132.69"/>
Name of Employer	Occupation		
Travelers Indemnity Co	SVP ClaimShrdSvcs & CFO Claim		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3129.19"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Thomas S Robison			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-2437402
Hartford	CT	06183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="27.88"/>
Name of Employer	Occupation		
Travelers Indemnity Co	CUO Nat'l Accts		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="903.41"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="293.26"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>