

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
The Travelers Companies, Inc. Political Action Committee (T-PAC)

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼  CITY ▲ STATE ▲ ZIP CODE ▲  
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 Year-End 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 (12S)  
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  /  /  through  /  /

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 Katie Chipps

Signature of Treasurer Katie Chipps [Electronically Filed] Date  /  /

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)

Write or Type Committee Name

The Travelers Companies, Inc. Political Action Committee (T-PAC)

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		160343.59
(b) Cash on Hand at Beginning of Reporting Period.....	139323.09	
(c) Total Receipts (from Line 19) .....	47845.60	121825.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	187168.69	282168.69
7. Total Disbursements (from Line 31).....	23000.00	118000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	164168.69	164168.69
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**The Travelers Companies, Inc. Political Action Committee (T-PAC)**

Report Covering the Period: From:  /  /  To:  /  /

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		
(i) Itemized (use Schedule A).....	38089.25	77479.88
(ii) Unitemized .....	9756.35	44345.22
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	47845.60	121825.10
(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) .....	47845.60	121825.10
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 Transfers (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))..... ▶	47845.60	121825.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	47845.60	121825.10

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	18000.00	101500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	5000.00	16500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	23000.00	118000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23000.00	118000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	47845.60	121825.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	47845.60	121825.10
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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 86
<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 Travelers Companies, Inc. Political Action Committee (T-PAC)**

**A. Vincent J Armentano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Claim CL  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **557.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2015**  
**Transaction ID : A2015-357155**  
 Amount of Each Receipt this Period  
**111.54**

**B. Vincent J Armentano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Claim CL  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **669.24**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**  
**Transaction ID : A2015-511554**  
 Amount of Each Receipt this Period  
**111.54**

**C. Lynda K Atkinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 120  
 2401 West Peoria Avenue  
 City Phoenix State AZ Zip Code 85029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation RVP Construction  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **276.90**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2015**  
**Transaction ID : A2015-357247**  
 Amount of Each Receipt this Period  
**55.38**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>278.46</b>
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
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.

Form/Schedule:  
Transaction ID:

**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 8 OF 86
	<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	

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

**A. Lynda K Atkinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 120  
 2401 West Peoria Avenue  
 City Phoenix State AZ Zip Code 85029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation RVP Construction  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 332.28

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511646**  
 Amount of Each Receipt this Period  
 55.38

**B. Todd Bateson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation President Specialized Distrib  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.55

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357131**  
 Amount of Each Receipt this Period  
 67.31

**C. Todd Bateson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation President Specialized Distrib  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 403.86

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511530**  
 Amount of Each Receipt this Period  
 67.31

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.00  
**TOTAL** This Period (last page this line number only)..... ▶



**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 9 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Niles C Bauer</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511648</b>
Mailing Address Suite 180 6060 S Willow Drive		Amount of Each Receipt this Period 38.46
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation Middle Market VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

Full Name (Last, First, Middle Initial) <b>B. Brett H Behar</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-357257</b>
Mailing Address 205 Lennon Lane		Amount of Each Receipt this Period 43.27
City Walnut Creek	State CA	Zip Code 94598
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation Claim Center VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.35	

Full Name (Last, First, Middle Initial) <b>C. Brett H Behar</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511656</b>
Mailing Address 205 Lennon Lane		Amount of Each Receipt this Period 43.27
City Walnut Creek	State CA	Zip Code 94598
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation Claim Center VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.62	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 10 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Scott C Belden</b>		Date of Receipt
Mailing Address One Tower Square		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015
City	State	Zip Code
Hartford	CT	06183
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2015-357113</b>
C		Amount of Each Receipt this Period
		134.62
Name of Employer	Occupation	
Travelers Indemnity Co	SVP Reinsurance	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	673.10	

Full Name (Last, First, Middle Initial) <b>B. Scott C Belden</b>		Date of Receipt
Mailing Address One Tower Square		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015
City	State	Zip Code
Hartford	CT	06183
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2015-511512</b>
C		Amount of Each Receipt this Period
		134.62
Name of Employer	Occupation	
Travelers Indemnity Co	SVP Reinsurance	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	807.72	

Full Name (Last, First, Middle Initial) <b>C. Jay S Benet</b>		Date of Receipt
Mailing Address One Tower Square		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015
City	State	Zip Code
Hartford	CT	06183
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2015-357103</b>
C		Amount of Each Receipt this Period
		288.46
Name of Employer	Occupation	
Travelers Indemnity Co	Vice Chairman & CFO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1442.30	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	557.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 11 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Jay S Benet</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511502</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 288.46
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 288.46
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 ▼ 1730.76	

Full Name (Last, First, Middle Initial) <b>B. Diane D Bengston</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-357070</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 134.62
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 134.62
Name of Employer Travelers Indemnity Co	Occupation SVP Enterprise HR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 673.10	

Full Name (Last, First, Middle Initial) <b>C. Diane D Bengston</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511470</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 134.62
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 134.62
Name of Employer Travelers Indemnity Co	Occupation SVP Enterprise HR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 807.72	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	557.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 12 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Andy F Bessette</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357227</b>
Mailing Address One Tower Square			Amount of Each Receipt this Period 211.54
City Hartford	State CT	Zip Code 06183	
FEC ID number of contributing federal political committee. C			
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 ▼ 1057.70		

Full Name (Last, First, Middle Initial) <b>B. Andy F Bessette</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511626</b>
Mailing Address One Tower Square			Amount of Each Receipt this Period 211.54
City Hartford	State CT	Zip Code 06183	
FEC ID number of contributing federal political committee. C			
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 ▼ 1269.24		

Full Name (Last, First, Middle Initial) <b>C. Melanie K Bittle</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511636</b>
Mailing Address 1301 E. Collins Boulevard			Amount of Each Receipt this Period 36.06
City Richardson	State TX	Zip Code 75081	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation RVP Select		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.36		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	459.14
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 13 OF 86
	<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

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

**A. Brad Bowman**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation President Agribusiness  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **208.35**

Date of Receipt **03 / 06 / 2015**  
**Transaction ID : A2015-357250**  
Amount of Each Receipt this Period **41.67**

**B. Brad Bowman**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation President Agribusiness  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.02**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511649**  
Amount of Each Receipt this Period **41.67**

**C. Robert Brody**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation EVP Claim  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1041.65**

Date of Receipt **03 / 06 / 2015**  
**Transaction ID : A2015-356913**  
Amount of Each Receipt this Period **208.33**

**SUBTOTAL** of Receipts This Page (optional)..... **291.67**  
**TOTAL** This Period (last page this line number only).....

**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 14 OF 86
	<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

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

**A. Robert Brody**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation EVP Claim

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1249.98**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A2015-511313**

Amount of Each Receipt this Period  
**208.33**

**B. Michael A Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 4650 Westway Park Blvd

City Houston State TX Zip Code 77041

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

Name of Employer Travelers Indemnity Co Occupation Claim Center VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **203.10**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A2015-511657**

Amount of Each Receipt this Period  
**33.85**

**C. Urana M Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation VP Information Systems

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A2015-357218**

Amount of Each Receipt this Period  
**57.69**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **299.87**

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

**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 15 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Urana M Brown</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511617</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 57.69
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation VP Information Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	

Full Name (Last, First, Middle Initial) <b>B. Lisa M Caputo</b>		Date of Receipt MM / DD / YYYY 03 / 03 / 2015 <b>Transaction ID : A2015-369328</b>
Mailing Address 485 Lexington Avenue		Amount of Each Receipt this Period 2500.00
City New York City	State NY	Zip Code 10017-2630
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation EVP Marketing & Communication	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Pamela R Carpenter</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-356918</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 56.73
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation COO National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.65	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2614.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 16 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Pamela R Carpenter</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511318</b>
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="56.73"/>
Name of Employer	Occupation		
Travelers Indemnity Co	COO National Accounts		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="340.38"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Daniel G Carr</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511667</b>
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="34.38"/>
Name of Employer	Occupation		
Travelers Indemnity Co	2VP and Actuary		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="206.28"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. James W Chapman</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-356921</b>
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="167.31"/>
Name of Employer	Occupation		
Travelers Indemnity Co	Co-PresidentFirst Party Group		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="836.55"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="258.42"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



**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 17 OF 86
<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

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

**A. James W Chapman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation Co-PresidentFirst Party Group  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1003.86

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511321**  
 Amount of Each Receipt this Period  
 167.31

**B. Robert T Checkosky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 180  
 6060 S Willow Drive  
 City Greenwood Village State CO Zip Code 80111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation RVP Select  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 204.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511307**  
 Amount of Each Receipt this Period  
 34.13

**C. John P Clifford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 385 Washington Street  
 City St. Paul State MN Zip Code 55102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation EVP Human Resources  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1041.65

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357075**  
 Amount of Each Receipt this Period  
 208.33

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 409.77  
**TOTAL** This Period (last page this line number only)..... ▶

**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 18 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. John P Clifford</b>		Date of Receipt
Mailing Address 385 Washington Street		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015
City	State	Zip Code
St. Paul	MN	55102
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2015-511475</b>
C		Amount of Each Receipt this Period
		208.33
Name of Employer	Occupation	
Travelers Indemnity Co	EVP Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1249.98	

Full Name (Last, First, Middle Initial) <b>B. Katherine S Conway</b>		Date of Receipt
Mailing Address One Tower Square		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015
City	State	Zip Code
Hartford	CT	06183
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2015-357331</b>
C		Amount of Each Receipt this Period
		81.73
Name of Employer	Occupation	
Travelers Indemnity Co	SVP CFO - International	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	408.65	

Full Name (Last, First, Middle Initial) <b>C. Katherine S Conway</b>		Date of Receipt
Mailing Address One Tower Square		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015
City	State	Zip Code
Hartford	CT	06183
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2015-511730</b>
C		Amount of Each Receipt this Period
		81.73
Name of Employer	Occupation	
Travelers Indemnity Co	SVP CFO - International	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	490.38	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	371.79
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 19 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. John Costello</b>		Date of Receipt 03 / 06 / 2015 <b>Transaction ID : A2015-357176</b>
Mailing Address 161 N Clark Street		Amount of Each Receipt this Period 79.33
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 396.65
Name of Employer Travelers Indemnity Co	Occupation VP International Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. John Costello</b>		Date of Receipt 03 / 20 / 2015 <b>Transaction ID : A2015-511575</b>
Mailing Address 161 N Clark Street		Amount of Each Receipt this Period 79.33
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 475.98
Name of Employer Travelers Indemnity Co	Occupation VP International Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Theresa L Diederich</b>		Date of Receipt 03 / 20 / 2015 <b>Transaction ID : A2015-511659</b>
Mailing Address Ste 2000 655 N Central Ave		Amount of Each Receipt this Period 33.65
City Glendale	State CA	Zip Code 91203-1422
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 201.90
Name of Employer Travelers Indemnity Co	Occupation Managing Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	192.31
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 20 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Paul H Eddy</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357291</b>
Mailing Address One Tower Square			Amount of Each Receipt this Period 111.54
City Hartford	State CT	Zip Code 06183	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation SVP Group Gen Counsel-Intl		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 557.70		

Full Name (Last, First, Middle Initial) <b>B. Paul H Eddy</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511690</b>
Mailing Address One Tower Square			Amount of Each Receipt this Period 111.54
City Hartford	State CT	Zip Code 06183	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation SVP Group Gen Counsel-Intl		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 669.24		

Full Name (Last, First, Middle Initial) <b>C. Henry F Edinger</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357112</b>
Mailing Address One Tower Square			Amount of Each Receipt this Period 43.27
City Hartford	State CT	Zip Code 06183	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation VP Chief Customer Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.35		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	266.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 21 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Henry F Edinger</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511511</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 43.27
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation VP Chief Customer Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.62	

Full Name (Last, First, Middle Initial) <b>B. Irwin R Ettinger</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-357094</b>
Mailing Address 485 Lexington Avenue		Amount of Each Receipt this Period 192.31
City New York City	State NY	Zip Code 10017-2630
FEC ID number of contributing federal political committee. C	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 ▼ 961.55	

Full Name (Last, First, Middle Initial) <b>C. Irwin R Ettinger</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511493</b>
Mailing Address 485 Lexington Avenue		Amount of Each Receipt this Period 192.31
City New York City	State NY	Zip Code 10017-2630
FEC ID number of contributing federal political committee. C	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 ▼ 1153.86	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	427.89
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 22 OF 86
	<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

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

**A. Claudia F Falvey**  
Full Name (Last, First, Middle Initial)

Mailing Address 1105 Berkshire Boulevard

City Wyomissing State PA Zip Code 19610

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

Name of Employer Travelers Indemnity Co Occupation RVP Construction

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **213.48**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A2015-511526**

Amount of Each Receipt this Period  
**35.58**

**B. Jay S Fishman**  
Full Name (Last, First, Middle Initial)

Mailing Address 485 Lexington Avenue

City New York City State NY Zip Code 10017-2630

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

Name of Employer Travelers Indemnity Co Occupation Chairman and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 16 / 2015**

**Transaction ID : A2015-510510**

Amount of Each Receipt this Period  
**5000.00**

**C. David M French**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation VP Finance-Small Commercial

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.60**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A2015-356943**

Amount of Each Receipt this Period  
**47.12**

**SUBTOTAL** of Receipts This Page (optional)..... **5082.70**

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

**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 23 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. David M French</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>20</td> <td>/</td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	20	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	20	/	2015								
Mailing Address One Tower Square		<b>Transaction ID : A2015-511343</b>										
City Hartford	State CT	Zip Code 06183										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.12										
Name of Employer Travelers Indemnity Co	Occupation VP Finance-Small Commercial											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.72											

Full Name (Last, First, Middle Initial) <b>B. Richard T French</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>20</td> <td>/</td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	20	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	20	/	2015								
Mailing Address 1105 Berkshire Boulevard		<b>Transaction ID : A2015-511355</b>										
City Wyomissing	State PA	Zip Code 19610										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.54										
Name of Employer Travelers Indemnity Co	Occupation RVP PL											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.24											

Full Name (Last, First, Middle Initial) <b>C. Matthew S Furman</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>06</td> <td>/</td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	06	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	06	/	2015								
Mailing Address 485 Lexington Avenue		<b>Transaction ID : A2015-357337</b>										
City New York City	State NY	Zip Code 10017-2630										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 142.31										
Name of Employer Travelers Indemnity Co	Occupation SVP Corp Secretary & Grp GC											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 711.55											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.97
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 24 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Matthew S Furman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 485 Lexington Avenue  
 City New York City State NY Zip Code 10017-2630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Corp Secretary & Grp GC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 853.86

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511736**  
 Amount of Each Receipt this Period  
 142.31

**B. Henry L Furtick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 100  
 1000 Windward Concourse  
 City Alpharetta State GA Zip Code 30005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation Regl President-Field Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357146**  
 Amount of Each Receipt this Period  
 75.00

**C. Henry L Furtick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 100  
 1000 Windward Concourse  
 City Alpharetta State GA Zip Code 30005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation Regl President-Field Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511545**  
 Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	292.31
<b>TOTAL</b> This Period (last page this line number only).....▶	



**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 25 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Marlyss J Gage</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-356925</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="208.33"/>
Name of Employer Travelers Indemnity Co	Occupation EVP & Enterprise CUO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1041.65"/>	

Full Name (Last, First, Middle Initial) <b>B. Marlyss J Gage</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-511325</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="208.33"/>
Name of Employer Travelers Indemnity Co	Occupation EVP & Enterprise CUO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1249.98"/>	

Full Name (Last, First, Middle Initial) <b>C. Cynthia M Garten</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-357271</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="43.27"/>
Name of Employer Travelers Indemnity Co	Occupation VP HR - Claim	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="216.35"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="459.93"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 26 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Cynthia M Garten</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511670</b>
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="43.27"/>
Name of Employer	Occupation		
Travelers Indemnity Co	VP HR - Claim		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="259.62"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Beth B Gehrhardt</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511674</b>
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="36.54"/>
Name of Employer	Occupation		
Travelers Indemnity Co	VP Human Resources		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="219.24"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Anthony J Giannone</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-356979</b>
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="52.88"/>
Name of Employer	Occupation		
Travelers Indemnity Co	President Boiler & Machinery		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="264.40"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="132.69"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 27 OF 86
	<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	

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

**A. Anthony J Giannone**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation President Boiler & Machinery

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **317.28**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A2015-511379**

Amount of Each Receipt this Period  
**52.88**

**B. Myles P Gibbons**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation President Select Accounts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.60**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A2015-356957**

Amount of Each Receipt this Period  
**72.12**

**C. Myles P Gibbons**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation President Select Accounts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **432.72**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A2015-511357**

Amount of Each Receipt this Period  
**72.12**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>197.12</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 28 OF 86
<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

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

**A. Donna L Glenn**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation VP Product  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **216.35**

Date of Receipt **03 / 06 / 2015**  
**Transaction ID : A2015-356954**  
Amount of Each Receipt this Period **43.27**

**B. Donna L Glenn**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation VP Product  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **259.62**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511354**  
Amount of Each Receipt this Period **43.27**

**C. Julie Griffard**  
Full Name (Last, First, Middle Initial)  
Mailing Address Suite 270  
940 West Port Plaza  
City St Louis State MO Zip Code 63146  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation VP UW Construction  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **204.79**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511531**  
Amount of Each Receipt this Period **36.54**

**SUBTOTAL** of Receipts This Page (optional)..... **123.08**  
**TOTAL** This Period (last page this line number only).....

**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 29 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Edward Griffiths</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-356961</b>
Mailing Address 205 Lennon Lane			Amount of Each Receipt this Period 50.00
City Walnut Creek	State CA	Zip Code 94598	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation Middle Market VP		
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. Edward Griffiths</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511361</b>
Mailing Address 205 Lennon Lane			Amount of Each Receipt this Period 50.00
City Walnut Creek	State CA	Zip Code 94598	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation Middle Market VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Scott T Hamm</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357121</b>
Mailing Address 485 Lexington Avenue			Amount of Each Receipt this Period 40.38
City New York City	State NY	Zip Code 10017-2630	
FEC ID number of contributing federal political committee. C			
Name of Employer Travelers Indemnity Co	Occupation National Accounts VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 30 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Scott T Hamm**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 485 Lexington Avenue  
 City New York City State NY Zip Code 10017-2630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation National Accounts VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 242.28

Date of Receipt  
 03 / 20 / 2015  
**Transaction ID : A2015-511520**  
 Amount of Each Receipt this Period  
 40.38

**B. Scott Haniford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 485 Lexington Avenue  
 City New York City State NY Zip Code 10017-2630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Alternative Investments  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1875.00

Date of Receipt  
 03 / 06 / 2015  
**Transaction ID : A2015-357177**  
 Amount of Each Receipt this Period  
 375.00

**C. Scott Haniford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 485 Lexington Avenue  
 City New York City State NY Zip Code 10017-2630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Alternative Investments  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt  
 03 / 20 / 2015  
**Transaction ID : A2015-511576**  
 Amount of Each Receipt this Period  
 375.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 790.38  
**TOTAL** This Period (last page this line number only)..... ▶

**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 31 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Rene Hernandez</b>		Date of Receipt
Mailing Address Ste 1005 1 N Dale Mabry Hwy		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City Tampa	State FL	Zip Code 33609
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2015-357334</b>
Name of Employer First Floridian Auto and Home	Occupation Assoc Group General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="56.54"/>
	<input type="text" value="282.70"/>	

Full Name (Last, First, Middle Initial) <b>B. Rene Hernandez</b>		Date of Receipt
Mailing Address Ste 1005 1 N Dale Mabry Hwy		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City Tampa	State FL	Zip Code 33609
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2015-511733</b>
Name of Employer First Floridian Auto and Home	Occupation Assoc Group General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="56.54"/>
	<input type="text" value="339.24"/>	

Full Name (Last, First, Middle Initial) <b>C. William H Heyman</b>		Date of Receipt
Mailing Address 485 Lexington Avenue		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City New York City	State NY	Zip Code 10017-2630
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2015-356971</b>
Name of Employer Travelers Indemnity Co	Occupation Vice Chairman Chief Inv Offcr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="288.46"/>
	<input type="text" value="1442.30"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="401.54"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 32 OF 86
	<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	

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

**A. William H Heyman**  
Full Name (Last, First, Middle Initial)

Mailing Address 485 Lexington Avenue

City New York City State NY Zip Code 10017-2630

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

Name of Employer Travelers Indemnity Co Occupation Vice Chairman Chief Inv Offcr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1730.76**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A2015-511371**

Amount of Each Receipt this Period  
**288.46**

**B. Scott F Higgins**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation SVPComm Spec Pres Comm Accts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **769.25**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A2015-357068**

Amount of Each Receipt this Period  
**153.85**

**C. Scott F Higgins**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation SVPComm Spec Pres Comm Accts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.10**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A2015-511468**

Amount of Each Receipt this Period  
**153.85**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **596.16**

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



**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 33 OF 86
	<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

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

**A. David W Hill**  
Full Name (Last, First, Middle Initial)

Mailing Address Suite 300  
10 Sentry Parkway

City Blue Bell State PA Zip Code 19422-2302

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

Name of Employer Travelers Indemnity Co Occupation Middle Market VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.95

Date of Receipt  
03 / 06 / 2015  
**Transaction ID : A2015-357129**

Amount of Each Receipt this Period  
45.19

**B. David W Hill**  
Full Name (Last, First, Middle Initial)

Mailing Address Suite 300  
10 Sentry Parkway

City Blue Bell State PA Zip Code 19422-2302

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

Name of Employer Travelers Indemnity Co Occupation Middle Market VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.14

Date of Receipt  
03 / 20 / 2015  
**Transaction ID : A2015-511528**

Amount of Each Receipt this Period  
45.19

**C. Melanie L Hudson**  
Full Name (Last, First, Middle Initial)

Mailing Address Suite 400  
11440 Carmel Commons Boulevard

City Charlotte State NC Zip Code 28226

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

Name of Employer Travelers Indemnity Co Occupation Middle Market VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.76

Date of Receipt  
03 / 20 / 2015  
**Transaction ID : A2015-511448**

Amount of Each Receipt this Period  
38.46

**SUBTOTAL** of Receipts This Page (optional).....▶ 128.84

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

**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 34 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Robert W Jenkins</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code
Hartford	CT	06183
FEC ID number of contributing federal political committee.		<b>Transaction ID : A2015-511363</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.96"/>
Name of Employer	Occupation	
Travelers Indemnity Co	VP Operations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="213.45"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Michael R Joachim</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Zip Code
Hartford	CT	06183
FEC ID number of contributing federal political committee.		<b>Transaction ID : A2015-357265</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="53.85"/>
Name of Employer	Occupation	
Travelers Indemnity Co	SVP Field Operations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="269.25"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Michael R Joachim</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code
Hartford	CT	06183
FEC ID number of contributing federal political committee.		<b>Transaction ID : A2015-511664</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="53.85"/>
Name of Employer	Occupation	
Travelers Indemnity Co	SVP Field Operations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="323.10"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="143.66"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 35 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Bruce R Jones</b>		Date of Receipt 03 / 06 / 2015 <b>Transaction ID : A2015-357116</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 70.00
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer Travelers Indemnity Co	Occupation EVP Chief Risk Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. Bruce R Jones</b>		Date of Receipt 03 / 20 / 2015 <b>Transaction ID : A2015-511515</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 70.00
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer Travelers Indemnity Co	Occupation EVP Chief Risk Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>C. Rufus E Jones</b>		Date of Receipt 03 / 20 / 2015 <b>Transaction ID : A2015-511508</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 35.58
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.58
Name of Employer Travelers Indemnity Co	Occupation VP UW MM Property	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.48	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 36 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Thomas J Joyce</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-356939</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 89.42
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	
Occupation SVP SLG		Aggregate Year-to-Date ▼ 447.10
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Thomas J Joyce</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511339</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 89.42
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	
Occupation SVP SLG		Aggregate Year-to-Date ▼ 536.52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Kamal G Karam</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357077</b>
Mailing Address 385 Washington Street		Amount of Each Receipt this Period 42.31
City St. Paul	State MN	Zip Code 55102
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	
Occupation VP Benefit Plan Investments		Aggregate Year-to-Date ▼ 211.55
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.15
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 37 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Kamal G Karam</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511477</b>
Mailing Address 385 Washington Street		Amount of Each Receipt this Period 42.31
City St. Paul	State MN	Zip Code 55102
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	
Occupation VP Benefit Plan Investments		Aggregate Year-to-Date ▼ 253.86
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Patricia H Kelley</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511629</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 33.46
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	
Occupation 2VP SLG		Aggregate Year-to-Date ▼ 200.76
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Patrick J Kinney</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-357130</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 208.33
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	
Occupation EVP Field Management & COO BI		Aggregate Year-to-Date ▼ 1041.65
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	284.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 38 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <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) <b>A. Patrick J Kinney</b>			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>20</td> <td>/</td> <td>2015</td> </tr> </table> <b>Transaction ID : A2015-511529</b>			M M	/	D D	/	Y Y Y Y	03	/	20	/	2015
M M	/	D D	/	Y Y Y Y											
03	/	20	/	2015											
Mailing Address One Tower Square			Amount of Each Receipt this Period <table border="1"> <tr> <td>208.33</td> </tr> </table>			208.33									
208.33															
City Hartford	State CT	Zip Code 06183													
FEC ID number of contributing federal political committee. C															
Name of Employer Travelers Indemnity Co		Occupation EVP Field Management & COO BI													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1249.98</td> </tr> </table>				1249.98									
1249.98															

Full Name (Last, First, Middle Initial) <b>B. Michael F Klein</b>			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>06</td> <td>/</td> <td>2015</td> </tr> </table> <b>Transaction ID : A2015-357074</b>			M M	/	D D	/	Y Y Y Y	03	/	06	/	2015
M M	/	D D	/	Y Y Y Y											
03	/	06	/	2015											
Mailing Address One Tower Square			Amount of Each Receipt this Period <table border="1"> <tr> <td>211.54</td> </tr> </table>			211.54									
211.54															
City Hartford	State CT	Zip Code 06183													
FEC ID number of contributing federal political committee. C															
Name of Employer Travelers Indemnity Co		Occupation EVP Co-President BI													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1057.70</td> </tr> </table>				1057.70									
1057.70															

Full Name (Last, First, Middle Initial) <b>C. Michael F Klein</b>			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>20</td> <td>/</td> <td>2015</td> </tr> </table> <b>Transaction ID : A2015-511474</b>			M M	/	D D	/	Y Y Y Y	03	/	20	/	2015
M M	/	D D	/	Y Y Y Y											
03	/	20	/	2015											
Mailing Address One Tower Square			Amount of Each Receipt this Period <table border="1"> <tr> <td>211.54</td> </tr> </table>			211.54									
211.54															
City Hartford	State CT	Zip Code 06183													
FEC ID number of contributing federal political committee. C															
Name of Employer Travelers Indemnity Co		Occupation EVP Co-President BI													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1269.24</td> </tr> </table>				1269.24									
1269.24															

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>631.41</td> </tr> </table>	631.41
631.41		
<b>TOTAL</b> This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 39 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. John Komidar</b>		Date of Receipt 03 / 20 / 2015 <b>Transaction ID : A2015-511639</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 39.42
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.42
Name of Employer Travelers Indemnity Co	Occupation VP Risk Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.52	

Full Name (Last, First, Middle Initial) <b>B. James A Kump</b>		Date of Receipt 03 / 20 / 2015 <b>Transaction ID : A2015-511704</b>
Mailing Address 385 Washington Street		Amount of Each Receipt this Period 35.58
City St. Paul	State MN	Zip Code 55102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.58
Name of Employer Travelers Indemnity Co	Occupation VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.48	

Full Name (Last, First, Middle Initial) <b>C. Thomas M Kunkel</b>		Date of Receipt 03 / 06 / 2015 <b>Transaction ID : A2015-357028</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 208.33
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
Name of Employer Travelers Indemnity Co	Occupation EVP President Bond & FP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1041.65	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	283.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 40 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Thomas M Kunkel</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511428</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 208.33
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation EVP President Bond & FP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1249.98	

Full Name (Last, First, Middle Initial) <b>B. William L Lamonica</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-357002</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 40.38
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation VP Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>C. William L Lamonica</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511402</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 40.38
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation VP Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.28	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	289.09
<b>TOTAL</b> This Period (last page this line number only).....▶	



**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 41 OF 86
<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

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

Full Name (Last, First, Middle Initial) <b>A. Madelyn J Lankton</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357321</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 96.15
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation EVP Chief Information Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) <b>B. Madelyn J Lankton</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511720</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 96.15
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation EVP Chief Information Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.90	

Full Name (Last, First, Middle Initial) <b>C. Patrick L Linehan</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357345</b>
Mailing Address 485 Lexington Avenue		Amount of Each Receipt this Period 119.23
City New York City	State NY	Zip Code 10017-2630
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation VP Corporate Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 596.15	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	311.53
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 42 OF 86
	<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)**

Full Name (Last, First, Middle Initial) <b>A. Patrick L Linehan</b>		Date of Receipt
Mailing Address 485 Lexington Avenue		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City State Zip Code New York City NY 10017-2630		<b>Transaction ID : A2015-511744</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="119.23"/>
Name of Employer Travelers Indemnity Co	Occupation VP Corporate Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="715.38"/>	

Full Name (Last, First, Middle Initial) <b>B. Brian MacLean</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-357098</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="355.77"/>
Name of Employer Travelers Indemnity Co	Occupation President and COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1778.85"/>	

Full Name (Last, First, Middle Initial) <b>C. Brian MacLean</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-511497</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="355.77"/>
Name of Employer Travelers Indemnity Co	Occupation President and COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2134.62"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="830.77"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 43 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Edward J Malek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 810  
 161 N Clark Street  
 City Chicago State IL Zip Code 60601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation Natl Qlty Ld Counsel Stf Cnsl  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **217.98**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511549**  
 Amount of Each Receipt this Period  
**36.33**

**B. William C Malugen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation EVP Co-President BI  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **961.55**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357047**  
 Amount of Each Receipt this Period  
**192.31**

**C. William C Malugen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation EVP Co-President BI  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1153.86**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511447**  
 Amount of Each Receipt this Period  
**192.31**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>420.95</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**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 44 OF 86
<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

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

**A. Sean D Martin**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation 2VP Claim Customer Experience

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.75**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A2015-357328**

Amount of Each Receipt this Period  
**46.15**

**B. Sean D Martin**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation 2VP Claim Customer Experience

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.90**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A2015-511727**

Amount of Each Receipt this Period  
**46.15**

**C. Mark A Mastrianni**  
Full Name (Last, First, Middle Initial)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

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

Name of Employer Travelers Indemnity Co Occupation VP National Distribution

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **216.35**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A2015-357091**

Amount of Each Receipt this Period  
**43.27**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **135.57**

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

**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 45 OF 86
<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

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

Full Name (Last, First, Middle Initial) <b>A. Mark A Mastrianni</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511490</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 43.27
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation VP National Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.62	

Full Name (Last, First, Middle Initial) <b>B. Todd L Mattiello</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-356932</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 47.12
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation 2VP Claim Customer Experience	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.60	

Full Name (Last, First, Middle Initial) <b>C. Todd L Mattiello</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511332</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 47.12
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation 2VP Claim Customer Experience	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.72	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	137.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 46 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Peter J McBrien</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511467</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 34.62
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation VP Strategic Projects
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) <b>B. Daniel J McCrudden</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511498</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 39.04
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation VP Product
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.24	

Full Name (Last, First, Middle Initial) <b>C. Robert K Mcilrath</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-357238</b>
Mailing Address 385 Washington Street		Amount of Each Receipt this Period 76.50
City St. Paul	State MN	Zip Code 55102
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation SVP Fixed Income
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 382.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 47 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Robert K McIlrath</b>		Date of Receipt
Mailing Address 385 Washington Street		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015
City State Zip Code St. Paul MN 55102		<b>Transaction ID : A2015-511637</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 76.50
Name of Employer Travelers Indemnity Co	Occupation SVP Fixed Income	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 459.00	

Full Name (Last, First, Middle Initial) <b>B. Glenn F McNamara</b>		Date of Receipt
Mailing Address One Tower Square		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-356969</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 64.90
Name of Employer Travelers Indemnity Co	Occupation Group General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.50	

Full Name (Last, First, Middle Initial) <b>C. Glenn F McNamara</b>		Date of Receipt
Mailing Address One Tower Square		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-511369</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 64.90
Name of Employer Travelers Indemnity Co	Occupation Group General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.40	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	206.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 48 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Scott McPhee</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511450</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 35.77
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation 2VP and Sr Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.62	

Full Name (Last, First, Middle Initial) <b>B. John Miletti</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511581</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 38.46
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation VP & Counsel Gov't Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

Full Name (Last, First, Middle Initial) <b>C. Robert A Miley</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357217</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 69.81
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation Group Gen Counsel-SLG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.05	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	144.04
<b>TOTAL</b> This Period (last page this line number only).....▶	



**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 49 OF 86
<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

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

Full Name (Last, First, Middle Initial) <b>A. Robert A Miley</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511616</b>
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="69.81"/>
Name of Employer	Occupation		
Travelers Indemnity Co	Group Gen Counsel-SLG		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="418.86"/>		

Full Name (Last, First, Middle Initial) <b>B. Jeffery W Moroski</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511443</b>
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="36.54"/>
Name of Employer	Occupation		
Travelers Indemnity Co	2VP UW BI UP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="219.24"/>		

Full Name (Last, First, Middle Initial) <b>C. Gabriella Nawi</b>			Date of Receipt
Mailing Address 485 Lexington Avenue			<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-422961</b>
New York City	NY	10017-2630	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="3750.00"/>
Name of Employer	Occupation		
Travelers Indemnity Co	SVP Investor Relations		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3750.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="3856.35"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 50 OF 86
<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

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

**A. John R Nealon**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation Group General Counsel  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **382.20**

Date of Receipt **03 / 06 / 2015**  
**Transaction ID : A2015-357181**  
Amount of Each Receipt this Period **76.44**

**B. John R Nealon**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation Group General Counsel  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **458.64**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511580**  
Amount of Each Receipt this Period **76.44**

**C. Eric M Nelson**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation VP CAT Underwriting Risk  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **235.60**

Date of Receipt **03 / 06 / 2015**  
**Transaction ID : A2015-357089**  
Amount of Each Receipt this Period **47.12**

**SUBTOTAL** of Receipts This Page (optional)..... **200.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 OF 86
	(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"/> 15
		<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) <b>A. Eric M Nelson</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-511488</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="47.12"/>
Name of Employer Travelers Indemnity Co	Occupation VP CAT Underwriting Risk	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="282.72"/>	

Full Name (Last, First, Middle Initial) <b>B. Christopher Nixon</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-357253</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="45.19"/>
Name of Employer Travelers Indemnity Co	Occupation VP Property	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.95"/>	

Full Name (Last, First, Middle Initial) <b>C. Christopher Nixon</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-511652</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="45.19"/>
Name of Employer Travelers Indemnity Co	Occupation VP Property	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="271.14"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="137.50"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 52 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Sarah Novascone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 1180  
 700 13th Street NW  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation VP Gov't Relations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **331.75**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357344**  
 Amount of Each Receipt this Period  
**66.35**

**B. Sarah Novascone**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 1180  
 700 13th Street NW  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation VP Gov't Relations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **398.10**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511743**  
 Amount of Each Receipt this Period  
**66.35**

**C. John P O'Connor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation VP Product  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **231.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511456**  
 Amount of Each Receipt this Period  
**38.56**

**SUBTOTAL** of Receipts This Page (optional)..... **171.26**  
**TOTAL** This Period (last page this line number only).....

**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 53 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Maria Olivo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 485 Lexington Avenue  
 City New York City State NY Zip Code 10017-2630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation EVP Strateg Dev and Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1153.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357019**  
 Amount of Each Receipt this Period  
 230.77

**B. Maria Olivo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 485 Lexington Avenue  
 City New York City State NY Zip Code 10017-2630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation EVP Strateg Dev and Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1384.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511419**  
 Amount of Each Receipt this Period  
 230.77

**C. William E Orr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 200  
 2420 Lakemont Avenue  
 City Orlando State FL Zip Code 32814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation Claim Center VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-356996**  
 Amount of Each Receipt this Period  
 44.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 505.54  
**TOTAL** This Period (last page this line number only)..... ▶

**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 54 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)**

Full Name (Last, First, Middle Initial) <b>A. William E Orr</b>		Date of Receipt
Mailing Address Suite 200 2420 Lakemont Avenue		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015
City Orlando	State FL	Zip Code 32814
FEC ID number of contributing federal political committee. C		<b>Transaction ID : A2015-511396</b>
Name of Employer Travelers Indemnity Co		Amount of Each Receipt this Period
Occupation Claim Center VP		44.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

Full Name (Last, First, Middle Initial) <b>B. Jerome A Passman</b>		Date of Receipt
Mailing Address One Tower Square		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		<b>Transaction ID : A2015-357097</b>
Name of Employer Travelers Indemnity Co		Amount of Each Receipt this Period
Occupation SVP Global Claim Svcs & GL		52.88
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.40	

Full Name (Last, First, Middle Initial) <b>C. Jerome A Passman</b>		Date of Receipt
Mailing Address One Tower Square		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		<b>Transaction ID : A2015-511496</b>
Name of Employer Travelers Indemnity Co		Amount of Each Receipt this Period
Occupation SVP Global Claim Svcs & GL		52.88
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.28	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	149.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 86
	(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"/> 15
		<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) <b>A. Maryellen Prudhomme</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511682</b>
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="37.50"/>
Name of Employer	Occupation		
Travelers Indemnity Co	Assoc Group General Counsel		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. William Queen</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-357066</b>
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="49.04"/>
Name of Employer	Occupation		
Travelers Indemnity Co	President Ocean Marine		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="245.20"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. William Queen</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511466</b>
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="49.04"/>
Name of Employer	Occupation		
Travelers Indemnity Co	President Ocean Marine		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="294.24"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="135.58"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 56 OF 86
	(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"/> 15
		<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) <b>A. Stacey Rawlings</b>		Date of Receipt
Mailing Address Suite 140 470 Friendship Road		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City Harrisburg	State PA	Zip Code 17111
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : A2015-511541</b>
Name of Employer Travelers Indemnity Co		Amount of Each Receipt this Period
Occupation RVP Select		<input type="text" value="37.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="225.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Brian P Reilly</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : A2015-356937</b>
Name of Employer Travelers Indemnity Co		Amount of Each Receipt this Period
Occupation SVP Chief Auditor		<input type="text" value="126.92"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="634.60"/>		

Full Name (Last, First, Middle Initial) <b>C. Brian P Reilly</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : A2015-511337</b>
Name of Employer Travelers Indemnity Co		Amount of Each Receipt this Period
Occupation SVP Chief Auditor		<input type="text" value="126.92"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="761.52"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="291.34"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



**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 57 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Karin Rhoads</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511524</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 39.42
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation VP & Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.52	

Full Name (Last, First, Middle Initial) <b>B. Ellen M Rizzo</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-356927</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 125.00
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation SVP CFOClaim Shared Services	
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. Ellen M Rizzo</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511327</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 125.00
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation SVP CFOClaim Shared Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	289.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 58 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Thomas S Robison</b>		Date of Receipt 03 / 06 / 2015 <b>Transaction ID : A2015-357143</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 55.77
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.77
Name of Employer Travelers Indemnity Co	Occupation CUO Nat'l Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 278.85	

Full Name (Last, First, Middle Initial) <b>B. Thomas S Robison</b>		Date of Receipt 03 / 20 / 2015 <b>Transaction ID : A2015-511542</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 55.77
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.77
Name of Employer Travelers Indemnity Co	Occupation CUO Nat'l Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.62	

Full Name (Last, First, Middle Initial) <b>C. Robert D Roland</b>		Date of Receipt 03 / 06 / 2015 <b>Transaction ID : A2015-357157</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 51.44
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 51.44
Name of Employer Travelers Indemnity Co	Occupation SVP Financial Sys & Acctg Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.20	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	162.98
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 59 OF 86
	<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

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

**A. Robert D Roland**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation SVP Financial Sys & Acctg Ops  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **308.64**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511556**  
Amount of Each Receipt this Period **51.44**

**B. David D Rowland**  
Full Name (Last, First, Middle Initial)  
Mailing Address 385 Washington Street  
City St. Paul State MN Zip Code 55102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation EVP Fixed Income  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 06 / 2015**  
**Transaction ID : A2015-357242**  
Amount of Each Receipt this Period **100.00**

**C. David D Rowland**  
Full Name (Last, First, Middle Initial)  
Mailing Address 385 Washington Street  
City St. Paul State MN Zip Code 55102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation EVP Fixed Income  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **600.00**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511641**  
Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **251.44**  
**TOTAL** This Period (last page this line number only).....

**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 60 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Douglas K Russell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Corporate Controller  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **673.10**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357228**  
 Amount of Each Receipt this Period  
**134.62**

**B. Douglas K Russell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Corporate Controller  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **807.72**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511627**  
 Amount of Each Receipt this Period  
**134.62**

**C. Francis W Sadowski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation Assoc Group General Counsel  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **219.24**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511618**  
 Amount of Each Receipt this Period  
**36.54**

**SUBTOTAL** of Receipts This Page (optional)..... **305.78**  
**TOTAL** This Period (last page this line number only).....

**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 61 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Duane A Sanders</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-357277</b>
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="62.50"/>
Name of Employer	Occupation		
Travelers Indemnity Co	SVP PI Canada		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="312.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Duane A Sanders</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511676</b>
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="62.50"/>
Name of Employer	Occupation		
Travelers Indemnity Co	SVP PI Canada		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. James A Scannell</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-350312</b>
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="1000.00"/>
Name of Employer	Occupation		
Travelers Indemnity Co	SVP Admin Services		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1125.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 62 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)**

Full Name (Last, First, Middle Initial) <b>A. Marc E Schmittlein</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357023</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 208.33
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation EVP Co-President BI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1041.65	

Full Name (Last, First, Middle Initial) <b>B. Marc E Schmittlein</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511423</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 208.33
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation EVP Co-President BI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1249.98	

Full Name (Last, First, Middle Initial) <b>C. Richard D Schug</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-356940</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 130.77
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation SVP & Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.85	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	547.43
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 63 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Richard D Schug**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP & Actuary  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **784.62**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**  
**Transaction ID : A2015-511340**  
 Amount of Each Receipt this Period  
**130.77**

**B. Peter Schwartz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Grp GenCounsel-Corp Litig  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **288.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2015**  
**Transaction ID : A2015-356958**  
 Amount of Each Receipt this Period  
**57.69**

**C. Peter Schwartz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Grp GenCounsel-Corp Litig  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **346.14**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2015**  
**Transaction ID : A2015-511358**  
 Amount of Each Receipt this Period  
**57.69**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>246.15</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 64 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Vincent J Seaver**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation VP Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511683**  
 Amount of Each Receipt this Period  
 34.90

**B. Marjorie M Selvaggio**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 280 E 96th Street  
 City Indianapolis State IN Zip Code 46240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation Claim Center VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511438**  
 Amount of Each Receipt this Period  
 34.62

**C. Nicholas Seminara**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVPGp Gen Cnsl ClmSubroTIS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 615.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357115**  
 Amount of Each Receipt this Period  
 123.08

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	192.60
<b>TOTAL</b> This Period (last page this line number only).....▶	



**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 65 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Nicholas Seminara</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511514</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 123.08
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation SVPGrp Gen Cnsl ClmSubroTIS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 738.48	

Full Name (Last, First, Middle Initial) <b>B. Peter Sexton</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-357269</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 42.69
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation Assoc Group Gen Counsel-Claim	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.45	

Full Name (Last, First, Middle Initial) <b>C. Peter Sexton</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511668</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 42.69
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation Assoc Group Gen Counsel-Claim	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.14	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	208.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 66 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Kevin C Smith</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-356912</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 208.33
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 1041.65	
Name of Employer TCI Global Services Inc	Occupation EVP President International	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Kevin C Smith</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511312</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 208.33
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 1249.98	
Name of Employer TCI Global Services Inc	Occupation EVP President International	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Marcia A Smith</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357231</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 48.08
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 240.40	
Name of Employer Travelers Indemnity Co	Occupation VP Planning & Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	464.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 67 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Marcia A Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511630</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 48.08
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation VP Planning & Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.48	

Full Name (Last, First, Middle Initial) <b>B. Richard L Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357241</b>
Mailing Address 385 Washington Street		Amount of Each Receipt this Period 69.23
City St. Paul	State MN	Zip Code 55102
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation Regl President-Field Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.15	

Full Name (Last, First, Middle Initial) <b>C. Richard L Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511640</b>
Mailing Address 385 Washington Street		Amount of Each Receipt this Period 69.23
City St. Paul	State MN	Zip Code 55102
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation Regl President-Field Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.38	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	186.54
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 86
	<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	

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

**A. Kenneth F Spence**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 385 Washington Street  
 City State Zip Code  
 St. Paul MN 55102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Travelers Indemnity Co EVP General Counsel  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1105.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357139**  
 Amount of Each Receipt this Period  
 221.15

**B. Kenneth F Spence**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 385 Washington Street  
 City State Zip Code  
 St. Paul MN 55102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Travelers Indemnity Co EVP General Counsel  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1326.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511538**  
 Amount of Each Receipt this Period  
 221.15

**C. John Stites**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City State Zip Code  
 Hartford CT 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Travelers Indemnity Co VP National Distribution  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 259.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-356976**  
 Amount of Each Receipt this Period  
 51.92

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	494.22
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 OF 86
	(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) <b>A. John Stites</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511376</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 51.92
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	
Occupation VP National Distribution		Aggregate Year-to-Date ▼ 311.52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Carol J Storrs</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357340</b>
Mailing Address Suite 1180 700 13th Street NW		Amount of Each Receipt this Period 84.62
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	
Occupation VP Gov't Relations		Aggregate Year-to-Date ▼ 423.10
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Carol J Storrs</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511739</b>
Mailing Address Suite 1180 700 13th Street NW		Amount of Each Receipt this Period 84.62
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	
Occupation VP Gov't Relations		Aggregate Year-to-Date ▼ 507.72
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 70 OF 86
<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

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

**A. Michael J Strietelmeier**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation VP RMIS  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **213.48**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511322**  
 Amount of Each Receipt this Period **35.58**

**B. Linda S Stueber**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 100  
 1000 Windward Concourse  
 City Alpharetta State GA Zip Code 30005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation RVP Construction  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **219.24**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511446**  
 Amount of Each Receipt this Period **36.54**

**C. Gerard S Suda**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Suite 300  
 445 South Street  
 City Morristown State NJ Zip Code 07960  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation UW Officer Nat'l Accts  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **205.38**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511433**  
 Amount of Each Receipt this Period **34.23**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>106.35</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 71 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Keith J Taylor</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357313</b>
Mailing Address Suite 180 6060 S Willow Drive		Amount of Each Receipt this Period 61.15
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation RVP Agribusiness
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.75	

Full Name (Last, First, Middle Initial) <b>B. Keith J Taylor</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511712</b>
Mailing Address Suite 180 6060 S Willow Drive		Amount of Each Receipt this Period 61.15
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation RVP Agribusiness
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.90	

Full Name (Last, First, Middle Initial) <b>C. William A Teed</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-357214</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 144.23
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C	Name of Employer Travelers Indemnity Co	Occupation Co-PresidentFirst Party Group
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 721.15	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	266.53
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 72 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. William A Teed</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511613</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 144.23
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation Co-PresidentFirst Party Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.38	

Full Name (Last, First, Middle Initial) <b>B. David B Teitelman</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2015 <b>Transaction ID : A2015-511336</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 37.02
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation Assoc Group Gen Counsel-SLG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.12	

Full Name (Last, First, Middle Initial) <b>C. Gregory C Toczydlowski</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 <b>Transaction ID : A2015-356941</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 208.33
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation EVP President - Personal Ins	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1041.65	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	389.58
<b>TOTAL</b> This Period (last page this line number only).....▶	



**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 73 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Gregory C Toczylowski</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511341</b>
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="208.33"/>
Name of Employer	Occupation		
Travelers Indemnity Co	EVP President - Personal Ins		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1249.98"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Anthony S Torsiello</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-511324</b>
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="38.46"/>
Name of Employer	Occupation		
Travelers Indemnity Co	VP Finance		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.76"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Julie A Trowbridge-Dillman</b>			Date of Receipt
Mailing Address One Tower Square			<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : A2015-357280</b>
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="153.85"/>
Name of Employer	Occupation		
Travelers Indemnity Co	EVP Operations EBIA & eBus		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="769.25"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="400.64"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 74 OF 86
	<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

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

**A. Julie A Trowbridge-Dillman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation EVP Operations EBIA & eBus  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **923.10**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511679**  
 Amount of Each Receipt this Period **153.85**

**B. Marc VanVooren**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation 2VP Claim  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **204.24**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511684**  
 Amount of Each Receipt this Period **34.04**

**C. Charles T Verfurth**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation President National Property  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **264.40**

Date of Receipt **03 / 06 / 2015**  
**Transaction ID : A2015-356928**  
 Amount of Each Receipt this Period **52.88**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>240.77</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 75 OF 86
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Charles T Verfurth</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511328</b>
Mailing Address One Tower Square			Amount of Each Receipt this Period 52.88
City Hartford	State CT	Zip Code 06183	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 317.28	
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) ▼			

Full Name (Last, First, Middle Initial) <b>B. Richard A Waskiewicz</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-356905</b>
Mailing Address One Tower Square			Amount of Each Receipt this Period 45.00
City Hartford	State CT	Zip Code 06183	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 225.00	
Name of Employer Travelers Indemnity Co		Occupation SVP Chief UW Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Richard A Waskiewicz</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511305</b>
Mailing Address One Tower Square			Amount of Each Receipt this Period 45.00
City Hartford	State CT	Zip Code 06183	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 270.00	
Name of Employer Travelers Indemnity Co		Occupation SVP Chief UW Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	142.88
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 76 OF 86
	<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	

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

**A. Lawrence J Welch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation President National Programs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-356942**  
 Amount of Each Receipt this Period  
 46.15

**B. Lawrence J Welch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation President National Programs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511342**  
 Amount of Each Receipt this Period  
 46.15

**C. Glenn E Westrick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 528.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357336**  
 Amount of Each Receipt this Period  
 105.77

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	198.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 77 OF 86
	<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	

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

Full Name (Last, First, Middle Initial) <b>A. Glenn E Westrick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511735</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 105.77
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
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 ▼ 634.62	

Full Name (Last, First, Middle Initial) <b>B. Sandra A Williams</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2015 <b>Transaction ID : A2015-356906</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 60.58
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation Assoc Group Gen Counsel-Claim	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.90	

Full Name (Last, First, Middle Initial) <b>C. Sandra A Williams</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2015 <b>Transaction ID : A2015-511306</b>
Mailing Address One Tower Square		Amount of Each Receipt this Period 60.58
City Hartford	State CT	Zip Code 06183
FEC ID number of contributing federal political committee. C		
Name of Employer Travelers Indemnity Co	Occupation Assoc Group Gen Counsel-Claim	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.48	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	226.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 78 OF 86
	(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) <b>A. Mary O Woods</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-357300</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="62.50"/>
Name of Employer Travelers Indemnity Co	Occupation SVP Chief UW Officer BI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="312.50"/>	

Full Name (Last, First, Middle Initial) <b>B. Mary O Woods</b>		Date of Receipt
Mailing Address One Tower Square		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City State Zip Code Hartford CT 06183		<b>Transaction ID : A2015-511699</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="62.50"/>
Name of Employer Travelers Indemnity Co	Occupation SVP Chief UW Officer BI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="375.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Joan K Woodward</b>		Date of Receipt
Mailing Address Suite 1180 700 13th Street NW		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2015"/>
City State Zip Code Washington DC 20005		<b>Transaction ID : A2015-350313</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer Travelers Indemnity Co	Occupation EVP Public Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5125.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 79 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. James A Wucherpfennig</b>			Date of Receipt
Mailing Address One Tower Square			M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015
City	State	Zip Code	<b>Transaction ID : A2015-357255</b>
Hartford	CT	06183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.19
Name of Employer	Occupation		
Travelers Indemnity Co	VP Worker's Compensation		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	225.95		

Full Name (Last, First, Middle Initial) <b>B. James A Wucherpfennig</b>			Date of Receipt
Mailing Address One Tower Square			M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2015
City	State	Zip Code	<b>Transaction ID : A2015-511654</b>
Hartford	CT	06183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.19
Name of Employer	Occupation		
Travelers Indemnity Co	VP Worker's Compensation		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	271.14		

Full Name (Last, First, Middle Initial) <b>C. Daniel T Yin</b>			Date of Receipt
Mailing Address 485 Lexington Avenue			M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2015
City	State	Zip Code	<b>Transaction ID : A2015-357216</b>
New York City	NY	10017-2630	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		134.62
Name of Employer	Occupation		
Travelers Indemnity Co	EVP Alternative Investments		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	673.10		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 80 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Daniel T Yin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 485 Lexington Avenue  
 City New York City State NY Zip Code 10017-2630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation EVP Alternative Investments  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **807.72**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511615**  
 Amount of Each Receipt this Period  
**134.62**

**B. William H Youngstrom**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation 2VP Claim Product Management  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **201.90**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2015  
**Transaction ID : A2015-511398**  
 Amount of Each Receipt this Period  
**33.65**

**C. Deborah M Zawisza**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Tower Square  
 City Hartford State CT Zip Code 06183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Travelers Indemnity Co Occupation SVP Chief Information Officer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **548.10**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : A2015-357343**  
 Amount of Each Receipt this Period  
**109.62**

**SUBTOTAL** of Receipts This Page (optional)..... **277.89**  
**TOTAL** This Period (last page this line number only).....



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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 86  
(check only one)

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

**A. Deborah M Zawisza**  
Full Name (Last, First, Middle Initial)  
Mailing Address One Tower Square  
City Hartford State CT Zip Code 06183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Travelers Indemnity Co Occupation SVP Chief Information Officer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **657.72**

Date of Receipt **03 / 20 / 2015**  
**Transaction ID : A2015-511742**  
Amount of Each Receipt this Period **109.62**

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>109.62</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>38089.25</b>

**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 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

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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. French Hill for Arkansas**

Mailing Address PO Box 7841

City Little Rock State AR Zip Code 72217

Purpose of Disbursement Contribution

011

Candidate Name

**French Hill**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: AR District: 02

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2015

**Transaction ID : B550681**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Chris Murphy**

Mailing Address 410 1st Street SE - Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Candidate Name

**Christopher Murphy**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: CT District:

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2015

**Transaction ID : B546959**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. CMR PAC**

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2015  Primary  General  Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

**Transaction ID : B547414**

Amount of Each Disbursement this Period

1000.00

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

5000.00

**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)

<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

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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. Dold for Congress**

Mailing Address PO Box 6312

City Libertyville State IL Zip Code 60048

Purpose of Disbursement Contribution

011

Candidate Name

**Bob Dold**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IL District: 10

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2015

Transaction ID : B549867

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Friends of John Delaney**

Mailing Address 3701 Porter Street NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Contribution

011

Candidate Name

**John Delaney**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: MD District: 06

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : B547416

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Bruce Poliquin for Congress**

Mailing Address PO Box 50

City Oakland State ME Zip Code 04963

Purpose of Disbursement Contribution

011

Candidate Name

**Bruce L Poliquin**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: ME District: 02

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

Transaction ID : B547415

Amount of Each Disbursement this Period

1000.00

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

4000.00

**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)

<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

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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. Friends of Kelly Ayotte**

Mailing Address 499 S. Capitol St. SW Ste 420

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Kelly Ayotte**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NH District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2015

**Transaction ID : B547417**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of Pat Toomey**

Mailing Address 499 S. Capitol St. SW Ste 420

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Pat Toomey**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2015

**Transaction ID : B547418**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Pat Toomey**

Mailing Address 499 S. Capitol St. SW Ste 420

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Pat Toomey**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		17		2015

**Transaction ID : B549866**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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 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

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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. American Insurance Assn Political Action Committee**

Mailing Address 2101 L Street NW Suite 400

City Washington State DC Zip Code 20037

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2015  Primary  General  Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

**Transaction ID : B547419**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Cathy McMorris Rodgers for Congress**

Mailing Address Box 137

City Spokane State WA Zip Code 99210

Purpose of Disbursement Contribution

011

Candidate Name

**Cathy McMorris Rodgers**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: WA District: 05

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2015

**Transaction ID : B547421**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

6000.00

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

18000.00

# 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

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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. AIA State PAC

Mailing Address 1130 Connecticut Ave. Ste. 1000

City Washington State DC Zip Code 20036

Purpose of Disbursement  
State PAC

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2015

Transaction ID : B547420

Amount of Each Disbursement this Period

5000.00
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Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

5000.00
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5000.00
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