

**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 164 OF 217
	<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. Ellen S Ryczek**  
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 Bond Claim Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **274.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 01 / 2015**

**Transaction ID : A2015-795802**

Amount of Each Receipt this Period  
**30.94**

**B. Ellen S Ryczek**  
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 Bond Claim Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.30**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 15 / 2015**

**Transaction ID : A2015-890255**

Amount of Each Receipt this Period  
**30.94**

**C. Ellen S Ryczek**  
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 Bond Claim Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.24**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 29 / 2015**

**Transaction ID : A2015-1021761**

Amount of Each Receipt this Period  
**30.94**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>92.82</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	