Elaine F. Marshall, Secretary of State
2016 Principal Expense Report Form – Zero Expense Short Form
For monthly and quarterly reports with no reportable expenditures; if you have reportable expenditure, use Form PR-ER.

Mailing Address: Lobbying Compliance Division
Department of the Secretary of State
P. O. Box 29622
Raleigh, NC 27626-0622
Phone: (919) 807-2170
Fax: (919) 807-2205
Web: www.secretary.stat.nc.us/lobbyists/lobforms.aspx
Electronic: www.secretary.stat.nc.us/lobbyists/lobforms.aspx

Period: Quarter Ended December 31, 2016

Complete Name of Principal: The Travelers Companies, Inc. & Subsidiaries
If the registered lobbyist principal has directed any lobbyist listed below to lobby on behalf of an unregistered associated entity, the principal must complete and attach Schedule PR-QAE to this quarterly report. The absence of such attachment constitutes the authorized officer’s affirmative statement under oath that there are no such unreported associated entities pursuant to G.S. §120C-403(b)(6) to disclose for the reporting period.

Name(s) of Lobbyist(s) as Registered: John D. Miletta
Include all lobbyists registered during the calendar year, including interim resignations/terminations.

**2016 Cumulative Combined Lobbyist Payment for Services**

<table>
<thead>
<tr>
<th>CUMULATIVE COMBINED 2016 PAYMENT FOR SERVICES</th>
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<tbody>
<tr>
<td>For this registration year, enter the dollar amount of the cumulative combined total payments to all lobbyists named on this quarterly report of the principal and the payees thereof: $5,135.00</td>
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</tbody>
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For this registration year, enter the dollar amount of the cumulative combined total of such payments to all terminated or resigned lobbyists of the principal not listed on this quarterly report for whom payment for services was reported on another expense report form.

Total cumulative combined payment for services for all lobbyists of the principal registered in 2016. $5,135.00
IMPORTANT INSTRUCTIONS FOR PRINCIPAL OFFICER AND NOTARY

ALL BLANKS MUST BE COMPLETED WITH PRINTED NAME OF AUTHORIZED OFFICER AND PRINTED NAME OF PRINCIPAL ENTITY. THE AUTHORIZED OFFICER MUST SIGN AND DATE REPORT TO CERTIFY REPORT IN THIS SECTION. FOR QUARTERLY REPORT UNDER OATH, VENUE (STATE AND COUNTY WHERE NOTARIZED) AND JURAT MUST ALSO BE COMPLETED. SIGNATORY AUTHORIZED OFFICER MUST BE A PERSON OF RECORD WITH THE LOBBYING COMPLIANCE DIVISION FOR REPORTING PURPOSES IN CURRENT YEAR. WARNING: INCOMPLETE CERTIFICATION OR NOTARIZATION MAY RESULT IN REJECTION OF REPORT.

STATE OF Connecticut
COUNTY OF Hartford

The undersigned as an authorized officer of the above named principal entity on behalf of the principal entity by its authority first duly given, or on his/her own behalf as an individual principal, being first duly sworn, hereby certifies that the principal has no expenditures pursuant to G.S. § 120C-403 other than payment for services to report for this quarterly period and that all information contained herein (including any attachments hereto) is true, complete and correct to the best of his/her knowledge and belief.

Signature of Authorized Officer

Sworn to (or affirmed) and subscribed before me,

this 13th day of January, 2017.

Signature of Notary Public

My commission expires: 4/30/18

Printed Full Name of Report Preparer:

Signature of Report Preparer:

DO NOT COMPLETE UNLESS REPORT PREPARER IS A PERSON OTHER THAN THE AUTHORIZED OFFICER SIGNING AND CERTIFYING REPORT WHO HAS EXERCISED INDEPENDENT JUDGMENT OR DISCRETION AS TO THE INFORMATION REPORTED. THE AUTHORIZED OFFICER MUST SIGN CERTIFICATION ABOVE. SIGNATURE HERE BY AUTHORIZED OFFICER IS UNNECESSARY AND DOES NOT CONSTITUTE CERTIFICATION OF REPORT UNDER OATH.