

Must be Received
No Later Than
August 27, 2008

In re St. Paul Travelers Securities Litigation II
c/o The Garden City Group, Inc.
PO BOX 9243
Dublin, OH 43017-4643
1-888-966-6846

S2P



CLAIMANT IDENTIFICATION:

Claim Number:

Control Number:

PROOF OF CLAIM

YOU MUST COMPLETE THIS CLAIM FORM BY AUGUST 27, 2008 TO BE ELIGIBLE TO SHARE IN THE \$77 MILLION SETTLEMENT.

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SECTION A - CLAIMANT INFORMATION

Claimant Name(s) (as you would like the name(s) to appear on the check, if eligible for payment):

Last 4 digits of Claimant Social Security Number/Taxpayer ID Number:

Name of the Person you would like the Claims Administrator to Contact Regarding This Claim (if different from the Claimant Name(s) listed above):

Claimant or Representative Contact Information:

The Claims Administrator will use this information for all communications relevant to this Claim (including the check, if eligible for payment). If this information changes, you MUST notify the Claims Administrator in writing at the address above.

Street Address:

City:

State and Zip Code:

Country (Other than U.S.):

Daytime Telephone Number: () -

Evening Telephone Number: () -

Email Address:

IF YOU FAIL TO SUBMIT A COMPLETE CLAIM BY AUGUST 27, 2008 YOUR CLAIM IS SUBJECT TO REJECTION OR YOUR PAYMENT MAY BE DELAYED.

NOTICE REGARDING ELECTRONIC FILES: Certain claimants with large numbers of transactions may request to, or may be requested to, submit information regarding their transactions in electronic files. All claimants **MUST** submit a manually signed paper Proof of Claim form listing all their transactions whether or not they also submit electronic copies. If you wish to file your claim electronically, you must contact the Claims Administrator at 1-888-966-6846 or visit their website at **www.gardencitygroup.com** to obtain the required file layout. No electronic files will be considered to have been properly submitted unless the Claims Administrator issues to the claimant a written acknowledgment of receipt and acceptance of electronically submitted data.



SECTION B - COMMON STOCK TRANSACTIONS

1. **BEGINNING HOLDINGS:** Number of shares of St. Paul common stock held at the close of business on **January 26, 2000**. (If none, write 0), (must be documented):

2. **PURCHASES:** Below, please list all purchases of St. Paul common stock and/or St. Paul Travelers Companies common stock during the period of **January 27, 2000** through and including **November 16, 2004**. (must be documented):

Date(s) of Purchase (List Chronologically) (Month/Day/Year)	Number of Shares Purchased	Purchase Price Per Share	Total Purchase Price (including commissions, taxes, or other fees)
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.

3. **MERGER HOLDINGS:** If you **EXCHANGED** Travelers Property Casualty A and/or B common shares in the Merger, list the number of St. Paul Travelers Companies shares you received in exchange. (If none, write 0), (must be documented):

IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS YOU MUST PHOTOCOPY THIS PAGE AND CHECK THIS BOX
IF YOU DO NOT CHECK THIS BOX THESE ADDITIONAL PAGES WILL NOT BE REVIEWED



SECTION B CONTINUED - COMMON STOCK TRANSACTIONS

4. **SALES:** Below, please list all sales of St. Paul common stock and/or St. Paul Travelers Companies common stock during the period between **January 27, 2000** and **November 16, 2004**, inclusive. (must be documented):

Sale Date(s) (List Chronologically) (Month/Day/Year)	Number of Shares of Common Stock Sold	Sale Price Per Share	Total Sale Price (after commissions, transfer taxes, or other fees)
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.

5. **UNSOLD HOLDINGS:** Number of shares of St. Paul Travelers Companies common stock held at the close of business on **November 16, 2004**. (If none, write 0), (must be documented):

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SECTION C - OPTION CONTRACTS
CALL OPTIONS

1. BEGINNING POSITION: At the close of business on **January 26, 2000** I owned the following call options on St. Paul common stock (must be documented):

Date of Purchase (List Chronologically) (Month/Day/Year)	Number of Contracts	Expiration Month and Year & Strike Price of Options (ie. May 2002/\$40)	Purchase Price Per Contract	Amount Paid (including commissions, taxes, and fees)	Insert an "E" if Exercised or an "X" if Expired	Exercise Date (Month/Day/Year)
/ /						/ /
/ /						/ /
/ /						/ /

2. PURCHASES: I made the following purchases of call options on St. Paul or St. Paul Travelers Companies common stock between **January 27, 2000** and **November 16, 2004**, inclusive (must be documented):

Date of Purchase (List Chronologically) (Month/Day/Year)	Number of Contracts	Expiration Month and Year & Strike Price of Options (ie. May 2002/\$40)	Purchase Price Per Contract	Amount Paid (including commissions, taxes, and fees)	Insert an "E" if Exercised or an "X" if Expired	Exercise Date (Month/Day/Year)
/ /						/ /
/ /						/ /
/ /						/ /

3. SALES: I made the following sales of the above call options on St. Paul or St. Paul Travelers Companies common stock which call options were purchased before **November 16, 2004** (include all such sales no matter when they occurred) (must be documented):

Date of Sale (List Chronologically) (Month/Day/Year)	Number of Contracts	Expiration Month and Year & Strike Price of Options (ie. May 2002/\$40)	Sale Price Per Contract	Amount Received (net of commissions, taxes, and fees)
/ /				
/ /				
/ /				

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SECTION C CONTINUED - OPTION CONTRACTS
PUT OPTIONS

4. **BEGINNING POSITION:** At the close of business on **January 26, 2000**, I was obligated on the following put options on St. Paul common stock (must be documented):

Number of Contracts	Expiration Month and Year & Strike Price of Options (ie. May 2002/\$40)	Sale Price Per Contract	Amount Received (net of commissions, taxes, and fees)	Insert an "A" if Assigned or an "X" if Expired	Assign Date (Month/Day/Year)
					/ /
					/ /
					/ /

5. **SALES (WRITING) OF PUT OPTIONS:** I wrote (sold) put options on St. Paul or St. Paul Travelers Companies common stock between **January 27, 2000** and **November 16, 2004**, inclusive, as follows (must be documented):

Date of Writing (Sale) (List Chronologically) (Month/Day/Year)	Number of Contracts	Expiration Month and Year & Strike Price of Options (ie. May 2002/\$40)	Sale Price Per Contract	Amount Received (net of commissions, taxes, and fees)	Insert an "A" if Assigned or an "X" if Expired	Assign Date (Month/Day/Year)
/ /						/ /
/ /						/ /
/ /						/ /

6. **COVERING TRANSACTIONS (REPURCHASES):** I made the following repurchases of the above put options on St. Paul or St. Paul Travelers Companies common stock that I wrote (sold) before **November 16, 2004 (include all repurchases no matter when they occurred)** (must be documented):

Date of Purchase (List Chronologically) (Month/Day/Year)	Number of Contracts	Expiration Month and Year & Strike Price of Options (ie. May 2002/\$40)	Price Paid Per Contract	Aggregate Cost (including commissions, taxes, and fees)
/ /				
/ /				
/ /				

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**SECTION D - BOND TRANSACTIONS
POSITIONS**

1. **BEGINNING AND ENDING POSITIONS:** Please provide the principal amount of the specified Bonds below that you may have held at the close of business on **January 26, 2000** and at the close of business on **November 16, 2004** (must be documented):

Code	Coupon Rate	Name of Issuer	Maturity Date	Cusip	Principal amount held as of the close of business on January 26, 2000	Principal amount held as of the close of business on November 16, 2004
A	0.000%	USF&G Corporation	3/3/2009	903290AD6		
B	5.75%	Travelers Cos Inc	3/15/2007	792860AF5		
C	6.380%	Travelers Cos Inc	12/15/2008	79286LDN9		
D	6.440%	St Paul Companies Inc	8/24/2005	79286LBP6		
E	6.550%	St Paul Companies Inc	12/5/2006	79286LDB5		
F	6.570%	St Paul Companies Inc	12/11/2006	79286LDD1		
G	6.580%	St Paul Companies Inc	12/11/2006	79286LDC3		
H	6.600%	St Paul Companies Inc	6/9/2005	79286LBZ4		
I	6.600%	St Paul Companies Inc	12/11/2006	79286LDE9		
J	6.680%	St Paul Companies Inc	7/13/2005	79286LCE0		
K	6.710%	St Paul Companies Inc	6/9/2005	79286LCB6		
L	6.720%	St Paul Companies Inc	6/9/2005	79286LCA8		
M	6.730%	St Paul Companies Inc	7/14/2005	79286LCF7		
N	6.740%	St Paul Companies Inc	7/18/2005	79286LCG5		
O	6.820%	St Paul Companies Inc	6/30/2005	79286LCC4		
P	6.850%	Travelers Cos Inc	7/2/2007	79286LCD2		
Q	6.860%	St Paul Companies Inc	6/8/2005	79286LBY7		
R	6.970%	St Paul Companies Inc	9/1/2006	79286LCY6		
S	7.010%	St Paul Companies Inc	6/1/2005	79286LBX9		
T	7.020%	St Paul Companies Inc	9/1/2006	79286LCZ3		

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**SECTION D CONTINUED - BOND TRANSACTIONS
POSITIONS**

Code	Coupon Rate	Name of Issuer	Maturity Date	Cusip	Principal amount held as of the close of business on January 26, 2000	Principal amount held as of the close of business on November 16, 2004
U	7.050%	Travelers Cos Inc	3/7/2007	79286LDG4		
V	7.090%	St Paul Companies Inc	8/1/2005	79286LCH3		
W	7.125%	USF&G Corporation	6/1/2005	903290AF1		
X	7.150%	St Paul Companies Inc	8/29/2006	79286LCW0		
Y	7.190%	Travelers Cos Inc	8/2/2007	79286LCK6		
Z	7.200%	Travelers Cos Inc	8/1/2007	79286LCJ9		
AA	7.210%	Travelers Cos Inc	8/29/2007	79286LCX8		
BB	7.220%	St Paul Companies Inc	8/28/2006	79286LCT7		
CC	7.240%	St Paul Companies Inc	8/21/2006	79286LCR1		
DD	7.250%	Travelers Cos Inc	8/9/2007	79286LCL4		
EE	7.280%	St Paul Companies Inc	8/22/2006	79286LCS9		
FF	7.280%	Travelers Cos Inc	8/28/2007	79286LCU4		
GG	7.290%	Travelers Cos Inc	8/21/2007	79286LCQ3		
HH	7.290%	Travelers Cos Inc	8/28/2007	79286LCV2		
II	7.330%	St Paul Companies Inc	8/18/2006	79286LCM2		
JJ	7.370%	Travelers Cos Inc	8/20/2007	79286LCN0		
KK	7.415%	Travelers Cos Inc	8/23/2010	79286LCP5		
LL	7.625%	MMI Capital Trust I	12/15/2027	553086AC3		
MM	7.875%	St Paul Companies Inc	4/15/2005	792860AE8		
NN	8.125%	Travelers Cos Inc	4/15/2010	792860AD0		
OO	8.470%	USF&G Capital II	1/10/2027	90330JAA8		
PP	9.000%	St Paul	8/16/2005	792860306		
QQ	4.500%	Travelers Cos Inc	4/15/2032	89420G307		
RR	7.600%	St Paul Capital Trust I	10/15/2050	85231F207		

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**SECTION D CONTINUED - BOND TRANSACTIONS
PURCHASES AND SALES**

2. PURCHASES: Below please list (in chronological order) all purchases of Bonds between **January 27, 2000** and **November 16, 2004**, inclusive (must be documented):

Insert Corresponding Code of Bonds as Indicated on Page 7 & 8	Date(s) of Purchase (Month/Day/Year)	Principal Amount	Purchase Price per \$1,000 of Principal Amount	Aggregate Cost (including commissions, taxes, and fees)
	/ /		.	.
	/ /		.	.
	/ /		.	.
	/ /		.	.
	/ /		.	.
	/ /		.	.

3. SALES: Below please list (in chronological order) all sales of Bonds between **January 27, 2000** and **November 16, 2004**, inclusive (must be documented):

Insert Corresponding Code of Bonds as Indicated on Page 7 & 8	Date(s) of Sale (Month/Day/Year)	Principal Amount	Sale Price per \$1,000 of Principal Amount	Amount Received (net of commissions, taxes, and fees)
	/ /		.	.
	/ /		.	.
	/ /		.	.
	/ /		.	.
	/ /		.	.
	/ /		.	.

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SECTION E - RELEASE AND SIGNATURE

I. SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS

I submit this Proof of Claim under the terms of the Stipulation of Settlement dated as of January 17, 2008, ("Stipulation"). I also submit to the jurisdiction of the United States District Court for the District of Minnesota, with respect to my claim as a Settlement Class Member (as defined in the Stipulation) and for purposes of enforcing the release set forth herein. I further acknowledge that I am bound by and subject to the terms of any judgment that may be entered in the Action. I agree to furnish additional information to Lead Plaintiff's Counsel to support this claim if required to do so. I have not submitted any other claim covering the same purchases, acquisitions or sales of St. Paul Companies, Inc., St. Paul Travelers Companies, Inc., and/or Travelers Property Casualty Corp. securities during the Class Period and know of no other Person having done so on my behalf.

II. RELEASE

"Released Claims" shall mean all claims (including "Unknown Claims" as defined below), demands, rights, liabilities and causes of action of every nature and description whatsoever, known or unknown, whether or not concealed or hidden, accrued or unaccrued, asserted or that might have been asserted, including, without limitation, claims for negligence, gross negligence, breach of duty of care and or breach of duty of loyalty, fraud, breach of fiduciary duty, or violations of any state or federal statutes, rules or regulations, without limitation, including the federal securities laws, that have been or that could have been asserted in the Action by or on behalf of the Lead Plaintiff, the Settlement Class or any Settlement Class Member against the Defendants or their Related Parties based on, arising out of, relating to, or in connection with the facts alleged in the complaints filed in this Action, disclosures made by Defendants during the Settlement Class Period or the purchase, acquisition, holding, sale or other disposition of securities during the Settlement Class Period, including but not limited to claims relating in any way to (1) broker compensation; (2) any alleged involvement in a bid-rigging scheme regarding bids or quotes for insurance; (3) the sale and use of non-traditional, loss mitigation or finite insurance or reinsurance (also known as finite reinsurance); (4) announcements regarding any of the foregoing; and (5) federal or state inquiries or investigations relating to any of the foregoing.

"Unknown Claims" shall collectively mean all claims, demands, rights, liabilities, and causes of action of every nature and description which the Lead Plaintiff or any Settlement Class Member does not know or suspect to exist in his, her or its favor at the time of the release of the Released Persons which, if known by him, her or it, might have affected his, her or its settlement with and release of the Released Persons, or might have affected his, her or its decision not to object to this Settlement.

I declare under penalty of perjury under the laws of the United States of America that the foregoing information supplied by the undersigned is true and correct.

Executed this _____ day of _____, in _____, _____.
(Month/Year) (City) (State/Country)

(Sign your name here)

(Type your name here)

Capacity of Person(s) Signing, e.g.,
Beneficial Purchaser, Executor
or Administrator



REMINDER CHECKLIST

1. Please fill out this form in its entirety.
2. Don't forget to sign page 10 of this form.
3. Don't forget to submit your supporting documents.
4. DO NOT SEND ORIGINALS OF ANY SUPPORTING DOCUMENTS.
5. The Claims Administrator will acknowledge receipt of your Proof of Claim by mail, within 30 days. Your Claim is not deemed filed until you receive an acknowledgment postcard. If you do not receive an acknowledgment postcard within 30 days, please call the Claims Administrator toll free at 1-888-966-6846.
6. If you move, please send us your new address.
7. **Do not use highlighter on the Proof of Claim form or supporting documentation.**

THIS PROOF OF CLAIM MUST BE RECEIVED NO LATER THAN
AUGUST 27, 2008 AND MUST BE MAILED TO:

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