

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Coventry Health Care Inc - First Health Group PAC

ADDRESS (number and street) 901 New York Avenue NW Third Floor
 Check if different than previously reported. (ACC)
Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** C00217216
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 Quarterly 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 11 23 2010 through 12 31 2010

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 John Ruhlmann

Signature of Treasurer Electronically Filed by John Ruhlmann Date 01 27 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Coventry Health Care Inc - First Health Group PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		141637.52
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	97199.01									
(c) Total Receipts (from Line 19)	2718.02	20499.54								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	99917.03	162137.06								
7. Total Disbursements (from Line 31)	53.78	62273.81								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	99863.25	99863.25								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Coventry Health Care Inc - First Health Group PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	2451.02	14566.58
(ii) Unitemized	267.00	5932.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2718.02	20499.54
(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)	2718.02	20499.54
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 Transfer (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))	2718.02	20499.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2718.02	20499.54

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	53.78	273.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	53.78	273.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	23500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	38500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	53.78	62273.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53.78	62273.81

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	2718.02	20499.54
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2718.02	20499.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	53.78	273.81
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	53.78	273.81

**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 / 30
	<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)
Coventry Health Care Inc - First Health Group PAC

A.	Full Name (Last, First, Middle Initial) Michael Bahr	Date of Receipt MM / DD / YYYY 11 / 24 / 2010
	Mailing Address 4669 W. Vista Drive	Transaction ID: A2010-3303056
	City Highland State UT Zip Code 84003	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Coventry Health Care Inc. Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

B.	Full Name (Last, First, Middle Initial) Michael Bahr	Date of Receipt MM / DD / YYYY 12 / 10 / 2010
	Mailing Address 4669 W. Vista Drive	Transaction ID: A2010-3359608
	City Highland State UT Zip Code 84003	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Coventry Health Care Inc. Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1325.00	

C.	Full Name (Last, First, Middle Initial) Michael Bahr	Date of Receipt MM / DD / YYYY 12 / 24 / 2010
	Mailing Address 4669 W. Vista Drive	Transaction ID: A2010-3359637
	City Highland State UT Zip Code 84003	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Coventry Health Care Inc. Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

A. 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.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Coventry Health Care Inc - First Health Group PAC

A. Full Name (Last, First, Middle Initial)
Pamela Barnes

Mailing Address 804 Dorset Drive

City State Zip Code
Wheaton IL 60187

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt MM / DD / YYYY
11 / 24 / 2010

Transaction ID: A2010-3303040

Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Pamela Barnes

Mailing Address 804 Dorset Drive

City State Zip Code
Wheaton IL 60187

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
12 / 10 / 2010

Transaction ID: A2010-3359592

Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Pamela Barnes

Mailing Address 804 Dorset Drive

City State Zip Code
Wheaton IL 60187

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 24 / 2010

Transaction ID: A2010-3359622

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) 30.00

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 9 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

<p>A. Full Name (Last, First, Middle Initial) Edward Borovatz</p> <p>Mailing Address 14742 Rolling Spring Drive Apt #207-5</p> <p>City State Zip Code Midlothian VA 23114</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Coventry Health Care Inc. Occupation Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 840.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2010</p> <p>Transaction ID: A2010-3303043</p> <p>Amount of Each Receipt this Period 35.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Edward Borovatz</p> <p>Mailing Address 14742 Rolling Spring Drive Apt #207-5</p> <p>City State Zip Code Midlothian VA 23114</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Coventry Health Care Inc. Occupation Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 875.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2010</p> <p>Transaction ID: A2010-3359595</p> <p>Amount of Each Receipt this Period 35.00</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Edward Borovatz</p> <p>Mailing Address 14742 Rolling Spring Drive Apt #207-5</p> <p>City State Zip Code Midlothian VA 23114</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Coventry Health Care Inc. Occupation Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 910.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2010</p> <p>Transaction ID: A2010-3359625</p> <p>Amount of Each Receipt this Period 35.00</p>
--	---

SUBTOTAL of Receipts This Page (optional)	105.00
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 10 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Coventry Health Care Inc - First Health Group PAC

A. Full Name (Last, First, Middle Initial)
Brian Britt

Mailing Address 330 West Meadow Drive

City Mechanicsburg State PA Zip Code 17055

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt 11 / 24 / 2010
Transaction ID: A2010-3303057
 Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Brian Britt

Mailing Address 330 West Meadow Drive

City Mechanicsburg State PA Zip Code 17055

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 10 / 2010
Transaction ID: A2010-3359609
 Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Brian Britt

Mailing Address 330 West Meadow Drive

City Mechanicsburg State PA Zip Code 17055

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 24 / 2010
Transaction ID: A2010-3359638
 Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 120.00

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 11 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial)
Lisa Chandler

Mailing Address 3946 Rhine Court
Suite 450

City State Zip Code
St. Charles MO 63304

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
MM / DD / YYYY
12 / 24 / 2010

Transaction ID: A2010-3359630

Amount of Each Receipt this Period
8.00

B.

Full Name (Last, First, Middle Initial)
Adrian Engels

Mailing Address 2523 E Oak Grove Dr

City State Zip Code
Sandy UT 84092

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

Name of Employer Coventry Health Care Inc. Occupation Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 24 / 2010

Transaction ID: A2010-3303038

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Adrian Engels

Mailing Address 2523 E Oak Grove Dr

City State Zip Code
Sandy UT 84092

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

Name of Employer Coventry Health Care Inc. Occupation Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2010

Transaction ID: A2010-3359590

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **28.00**

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 12 / 30

(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial)
Adrian Engels

Mailing Address 2523 E Oak Grove Dr

City State Zip Code
Sandy UT 84092

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

Name of Employer Coventry Health Care Inc. Occupation Supervisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: A2010-3359620

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Maria Fitzpatrick

Mailing Address 5002 Cedar Croft Drive

City State Zip Code
Bethesda MD 20814

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1392.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Transaction ID: A2010-3303062

Amount of Each Receipt this Period
58.00

C.

Full Name (Last, First, Middle Initial)
Maria Fitzpatrick

Mailing Address 5002 Cedar Croft Drive

City State Zip Code
Bethesda MD 20814

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1450.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: A2010-3359614

Amount of Each Receipt this Period
58.00

SUBTOTAL of Receipts This Page (optional) ▶

126.00

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 13 / 30

(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial)
Maria Fitzpatrick

Mailing Address 5002 Cedar Croft Drive

City State Zip Code
Bethesda MD 20814

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1508.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: A2010-3359643

Amount of Each Receipt this Period

58.00

B.

Full Name (Last, First, Middle Initial)
Greg Hale

Mailing Address 1615 William Penn Drive #21E

City State Zip Code
Naperville IL 60563

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

Name of Employer Coventry Health Care Inc. Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.96

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Transaction ID: A2010-3303037

Amount of Each Receipt this Period

14.04

C.

Full Name (Last, First, Middle Initial)
Greg Hale

Mailing Address 1615 William Penn Drive #21E

City State Zip Code
Naperville IL 60563

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

Name of Employer Coventry Health Care Inc. Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: A2010-3359589

Amount of Each Receipt this Period

14.04

SUBTOTAL of Receipts This Page (optional) ▶

86.08

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: PAGE 14 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Greg Hale		Date of Receipt MM / DD / YYYY 12 / 24 / 2010
Mailing Address 1615 William Penn Drive #21E		Transaction ID: A2010-3359619
City Naperville	State IL	Zip Code 60563
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.04
Name of Employer Coventry Health Care Inc.	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.04	

B.

Full Name (Last, First, Middle Initial) Janet Hamner		Date of Receipt MM / DD / YYYY 11 / 24 / 2010
Mailing Address 10219 Pemcrest		Transaction ID: A2010-3303063
City San Antonio	State TX	Zip Code 78240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 936.00	

C.

Full Name (Last, First, Middle Initial) Janet Hamner		Date of Receipt MM / DD / YYYY 12 / 10 / 2010
Mailing Address 10219 Pemcrest		Transaction ID: A2010-3359615
City San Antonio	State TX	Zip Code 78240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

SUBTOTAL of Receipts This Page (optional)	▶	92.04
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 15 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial)
Janet Hamner

Mailing Address 10219 Pemcrest

City San Antonio State TX Zip Code 78240

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt 12 / 24 / 2010

Transaction ID: A2010-3359644

Amount of Each Receipt this Period 39.00

B.

Full Name (Last, First, Middle Initial)
Kim Isbell

Mailing Address 6140 Moss Rose Lane

City Aubrey State TX Zip Code 76227

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

Name of Employer Coventry Health Care Inc. Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 24 / 2010

Transaction ID: A2010-3303042

Amount of Each Receipt this Period 20.00

C.

Full Name (Last, First, Middle Initial)
Kim Isbell

Mailing Address 6140 Moss Rose Lane

City Aubrey State TX Zip Code 76227

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

Name of Employer Coventry Health Care Inc. Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 10 / 2010

Transaction ID: A2010-3359594

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 79.00

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 16 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Kim Isbell		Date of Receipt MM / DD / YYYY 12 / 24 / 2010	
Mailing Address 6140 Moss Rose Lane		Transaction ID: A2010-3359624	
City Aubrey	State TX	Zip Code 76227	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer Coventry Health Care Inc.	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

B.

Full Name (Last, First, Middle Initial) Kenneth Kurzendoerfer		Date of Receipt MM / DD / YYYY 11 / 24 / 2010	
Mailing Address 5104 Remington Road		Transaction ID: A2010-3303047	
City San Diego	State CA	Zip Code 92115	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Coventry Health Care Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00		

C.

Full Name (Last, First, Middle Initial) Kenneth Kurzendoerfer		Date of Receipt MM / DD / YYYY 12 / 10 / 2010	
Mailing Address 5104 Remington Road		Transaction ID: A2010-3359599	
City San Diego	State CA	Zip Code 92115	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Coventry Health Care Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1325.00		

SUBTOTAL of Receipts This Page (optional)	70.00
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 17 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Kenneth Kurzendoerfer		Date of Receipt MM / DD / YYYY 12 / 24 / 2010
Mailing Address 5104 Remington Road		Transaction ID: A2010-3359628
City San Diego	State CA	Zip Code 92115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

B.

Full Name (Last, First, Middle Initial) Joan Liberatore		Date of Receipt MM / DD / YYYY 11 / 24 / 2010
Mailing Address 1549 Virginia Avenue		Transaction ID: A2010-3303044
City Monaca	State PA	Zip Code 15061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.

Full Name (Last, First, Middle Initial) Joan Liberatore		Date of Receipt MM / DD / YYYY 12 / 10 / 2010
Mailing Address 1549 Virginia Avenue		Transaction ID: A2010-3359596
City Monaca	State PA	Zip Code 15061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional)	75.00
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 18 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Joan Liberatore		Date of Receipt MM / DD / YYYY 12 / 24 / 2010
Mailing Address 1549 Virginia Avenue		Transaction ID: A2010-3359626
City Monaca	State PA	Zip Code 15061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.

Full Name (Last, First, Middle Initial) Timothy Nolan		Date of Receipt MM / DD / YYYY 11 / 24 / 2010
Mailing Address 901 New York Avenue NW Third Fl.		Transaction ID: A2010-3303065
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	

C.

Full Name (Last, First, Middle Initial) Timothy Nolan		Date of Receipt MM / DD / YYYY 12 / 10 / 2010
Mailing Address 901 New York Avenue NW Third Fl.		Transaction ID: A2010-3359617
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.90	

SUBTOTAL of Receipts This Page (optional)	▶	409.60
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 19 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Coventry Health Care Inc - First Health Group PAC

A. Full Name (Last, First, Middle Initial)
Timothy Nolan

Mailing Address 901 New York Avenue NW Third Fl.

City State Zip Code
Washington DC 20001

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 769.20

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: A2010-3359646

Amount of Each Receipt this Period
192.30

B. Full Name (Last, First, Middle Initial)
Mary Louise Osborne

Mailing Address 234 Overbrook Road

City State Zip Code
Valencia PA 16059

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1392.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 1 0

Transaction ID: A2010-3303059

Amount of Each Receipt this Period
58.00

C. Full Name (Last, First, Middle Initial)
Mary Louise Osborne

Mailing Address 234 Overbrook Road

City State Zip Code
Valencia PA 16059

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: A2010-3359611

Amount of Each Receipt this Period
58.00

SUBTOTAL of Receipts This Page (optional) ▶ **308.30**

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 20 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Mary Louise Osborne		Date of Receipt MM / DD / YYYY 12 / 24 / 2010
Mailing Address 234 Overbrook Road		Transaction ID: A2010-3359640
City Valencia	State PA	Zip Code 16059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 58.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1508.00	

B.

Full Name (Last, First, Middle Initial) Sabrina Rajendran		Date of Receipt MM / DD / YYYY 11 / 24 / 2010
Mailing Address 111 Patrick Avenue		Transaction ID: A2010-3303055
City Willow Springs	State IL	Zip Code 60480
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.

Full Name (Last, First, Middle Initial) Sabrina Rajendran		Date of Receipt MM / DD / YYYY 12 / 10 / 2010
Mailing Address 111 Patrick Avenue		Transaction ID: A2010-3359607
City Willow Springs	State IL	Zip Code 60480
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional)	108.00
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 21 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Coventry Health Care Inc - First Health Group PAC

A. Full Name (Last, First, Middle Initial)
Sabrina Rajendran

Mailing Address 111 Patrick Avenue

City Willow Springs State IL Zip Code 60480

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 24 / 2010
Transaction ID: A2010-3359636
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Steven Robino

Mailing Address 12915 Grant Street Suite 450

City Overland Park State KS Zip Code 66213

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt 11 / 24 / 2010
Transaction ID: A2010-3303051
Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Steven Robino

Mailing Address 12915 Grant Street Suite 450

City Overland Park State KS Zip Code 66213

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 12 / 10 / 2010
Transaction ID: A2010-3359603
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 85.00

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 22 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Steven Robino		Date of Receipt MM / DD / YYYY 12 / 24 / 2010
Mailing Address 12915 Grant Street Suite 450		Transaction ID: A2010-3359632
City Overland Park	State KS	Zip Code 66213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

B.

Full Name (Last, First, Middle Initial) Dennis Roth		Date of Receipt MM / DD / YYYY 11 / 24 / 2010
Mailing Address 5393 Bothe Avenue		Transaction ID: A2010-3303041
City San Diego	State CA	Zip Code 92122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Coventry Health Care Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	

C.

Full Name (Last, First, Middle Initial) Dennis Roth		Date of Receipt MM / DD / YYYY 12 / 10 / 2010
Mailing Address 5393 Bothe Avenue		Transaction ID: A2010-3359593
City San Diego	State CA	Zip Code 92122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Coventry Health Care Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	110.00
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 23 / 30

(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

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)
Coventry Health Care Inc - First Health Group PAC

A.	Full Name (Last, First, Middle Initial) Dennis Roth		Date of Receipt
	Mailing Address 5393 Bothe Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 4 / 2 0 1 0
	City	State	Zip Code
	San Diego	CA	92122
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-3359623
		Amount of Each Receipt this Period	
		<input type="text"/> 40.00	
Name of Employer Coventry Health Care Inc.		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 1040.00	

B.	Full Name (Last, First, Middle Initial) Rebecca Sanborn		Date of Receipt
	Mailing Address 40 Calverton Road Suite 450		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 4 / 2 0 1 0
	City	State	Zip Code
	St. Louis	MO	63135
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-3303054
		Amount of Each Receipt this Period	
		<input type="text"/> 25.00	
Name of Employer Coventry Health Care Inc.		Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 600.00	

C.	Full Name (Last, First, Middle Initial) Rebecca Sanborn		Date of Receipt
	Mailing Address 40 Calverton Road Suite 450		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 0 / 2 0 1 0
	City	State	Zip Code
	St. Louis	MO	63135
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-3359606
		Amount of Each Receipt this Period	
		<input type="text"/> 25.00	
Name of Employer Coventry Health Care Inc.		Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 625.00	

SUBTOTAL of Receipts This Page (optional) ▶

90.00

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 24 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Rebecca Sanborn		Date of Receipt MM / DD / YYYY 12 / 24 / 2010
Mailing Address 40 Calverton Road Suite 450		Transaction ID: A2010-3359635
City St. Louis	State MO	Zip Code 63135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.

Full Name (Last, First, Middle Initial) Daniel Scherr		Date of Receipt MM / DD / YYYY 11 / 24 / 2010
Mailing Address 4679 Shelley Lane		Transaction ID: A2010-3303036
City Ellicott City	State MD	Zip Code 21043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.

Full Name (Last, First, Middle Initial) Daniel Scherr		Date of Receipt MM / DD / YYYY 12 / 10 / 2010
Mailing Address 4679 Shelley Lane		Transaction ID: A2010-3359588
City Ellicott City	State MD	Zip Code 21043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	45.00
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 25 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Coventry Health Care Inc - First Health Group PAC

A. Full Name (Last, First, Middle Initial)
Daniel Scherr
 Mailing Address 4679 Shelley Lane
 City Ellicott City State MD Zip Code 21043
 Date of Receipt 12 / 24 / 2010
Transaction ID: A2010-3359618
 Amount of Each Receipt this Period 10.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Coventry Health Care Inc. Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 260.00

B. Full Name (Last, First, Middle Initial)
Ann Stoepelwerth
 Mailing Address 4360 S. Victor Avenue
 City Tulsa State OK Zip Code 74105
 Date of Receipt 11 / 24 / 2010
Transaction ID: A2010-3303061
 Amount of Each Receipt this Period 38.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Coventry Health Care Inc. Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 912.00

C. Full Name (Last, First, Middle Initial)
Ann Stoepelwerth
 Mailing Address 4360 S. Victor Avenue
 City Tulsa State OK Zip Code 74105
 Date of Receipt 12 / 10 / 2010
Transaction ID: A2010-3359613
 Amount of Each Receipt this Period 38.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Coventry Health Care Inc. Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 950.00

SUBTOTAL of Receipts This Page (optional) ► 86.00
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 26 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Coventry Health Care Inc - First Health Group PAC

A. Full Name (Last, First, Middle Initial)
Ann Stoepelwerth
 Mailing Address 4360 S. Victor Avenue
 City State Zip Code
Tulsa OK 74105
 Date of Receipt
MM / DD / YYYY
12 / 24 / 2010
Transaction ID: A2010-3359642
 Amount of Each Receipt this Period
38.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coventry Health Care Inc. Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 988.00

B. Full Name (Last, First, Middle Initial)
Jerome Wall
 Mailing Address 8601 Breezewood Dr. Suite 450
 City State Zip Code
Pittsburgh PA 63128
 Date of Receipt
MM / DD / YYYY
11 / 24 / 2010
Transaction ID: A2010-3303052
 Amount of Each Receipt this Period
10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coventry Health Care Inc. Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

C. Full Name (Last, First, Middle Initial)
Jerome Wall
 Mailing Address 8601 Breezewood Dr. Suite 450
 City State Zip Code
Pittsburgh PA 63128
 Date of Receipt
MM / DD / YYYY
12 / 10 / 2010
Transaction ID: A2010-3359604
 Amount of Each Receipt this Period
10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coventry Health Care Inc. Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 58.00
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 27 / 30
(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Jerome Wall		Date of Receipt MM / DD / YYYY 12 / 24 / 2010
Mailing Address 8601 Breezewood Dr. Suite 450		Transaction ID: A2010-3359633
City Pittsburgh	State PA	Zip Code 63128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) Joseph Winn		Date of Receipt MM / DD / YYYY 11 / 24 / 2010
Mailing Address 14022 Jump Drive		Transaction ID: A2010-3303060
City Germantown	State MD	Zip Code 20874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.

Full Name (Last, First, Middle Initial) Joseph Winn		Date of Receipt MM / DD / YYYY 12 / 10 / 2010
Mailing Address 14022 Jump Drive		Transaction ID: A2010-3359612
City Germantown	State MD	Zip Code 20874
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 28 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Coventry Health Care Inc - First Health Group PAC

A. Full Name (Last, First, Middle Initial)
Joseph Winn

Mailing Address 14022 Jump Drive

City State Zip Code
Germantown MD 20874

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
12 / 24 / 2010

Transaction ID: A2010-3359641

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Rachel Zektser

Mailing Address 2002 William Franklin Drive Suite 450

City State Zip Code
Frederick MD 21702

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 24 / 2010

Transaction ID: A2010-3303053

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Rachel Zektser

Mailing Address 2002 William Franklin Drive Suite 450

City State Zip Code
Frederick MD 21702

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2010

Transaction ID: A2010-3359605

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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 29 / 30
	(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

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)
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Rachel Zektser		Date of Receipt
Mailing Address 2002 William Franklin Drive Suite 450		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
City	State	Zip Code
Frederick	MD	21702
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: A2010-3359634
Name of Employer Coventry Health Care Inc.		Amount of Each Receipt this Period
Occupation Manager		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2451.02"/>

**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)

PAGE 30 / 30

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
Coventry Health Care Inc - First Health Group PAC

A. Full Name (Last, First, Middle Initial) J.P. Morgan Bank <hr/> Mailing Address P.O. Box 260180 <hr/> City Baton Rouge State LA Zip Code 70826 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B374858 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 22.44 Category/Type 001
B. Full Name (Last, First, Middle Initial) J.P. Morgan Bank <hr/> Mailing Address P.O. Box 260180 <hr/> City Baton Rouge State LA Zip Code 70826 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B375833 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 31.34 Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ►

53.78

TOTAL This Period (last page this line number only) ►

53.78