

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
CIGNA Corporation Political Action Committee

ADDRESS (number and street) Two Liberty Place
1601 Chestnut St
 Check if different than previously reported. (ACC)
Philadelphia PA 19192

2. **FEC IDENTIFICATION NUMBER** C00085316
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 (12G)
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 01 2007 through 11 30 2007

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 Mari Newman, Asst. Treasurer

Signature of Treasurer Electronically Filed by Mari Newman, Asst. Treasurer Date 12 13 2007

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)

Page 2

Write or Type Committee Name
CIGNA Corporation Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		20629.41
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	20486.44									
(c) Total Receipts (from Line 19)	17239.21	146114.24								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	37725.65	166743.65								
7. Total Disbursements (from Line 31)	-5846.00	123172.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43571.65	43571.65								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
CIGNA Corporation Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	10408.28	49040.24
(i) Itemized (use Schedule A)	6830.93	97074.00
(ii) Unitemized	17239.21	146114.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17239.21	146114.24
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))	17239.21	146114.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17239.21	146114.24

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) 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.....	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.....	0.00	91500.00
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.....	-5846.00	31672.00
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))..	-5846.00	123172.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	-5846.00	123172.00

DETAILED SUMMARY PAGE
of Disbursements

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	17239.21	146114.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17239.21	146114.24
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Rebecca A Allison		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 10636 N 11th Street		Transaction ID: 20071029-7362-23-3	
City State Zip Code Phoenix AZ 85020-1180	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation CARDIOLOGIST (INVASIVE)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Rebecca A Allison		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 10636 N 11th Street		Transaction ID: 20071112-7347-23-3	
City State Zip Code Phoenix AZ 85020-1180	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation CARDIOLOGIST (INVASIVE)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Rebecca A Allison		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 10636 N 11th Street		Transaction ID: 20071126-7335-23-3	
City State Zip Code Phoenix AZ 85020-1180	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation CARDIOLOGIST (INVASIVE)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jacquelyn A Aube		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 166 Wildflower Circle		Transaction ID: 20071029-2261-23-3	
City State Zip Code Westfield MA 01085-5403	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Jacquelyn A Aube		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 166 Wildflower Circle		Transaction ID: 20071112-2256-23-3	
City State Zip Code Westfield MA 01085-5403	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Jacquelyn A Aube		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 166 Wildflower Circle		Transaction ID: 20071126-2256-23-3	
City State Zip Code Westfield MA 01085-5403	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. James Austin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 394 W Remington Drive		Transaction ID: 20071029-7490-23-3
City State Zip Code Chandler AZ 85248-2642	Amount of Each Receipt this Period 23.35	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation GENERAL SURGEON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 554.20	

Full Name (Last, First, Middle Initial) B. James Austin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 394 W Remington Drive		Transaction ID: 20071112-7475-23-3
City State Zip Code Chandler AZ 85248-2642	Amount of Each Receipt this Period 23.35	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation GENERAL SURGEON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 554.20	

Full Name (Last, First, Middle Initial) C. James Austin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 394 W Remington Drive		Transaction ID: 20071126-7463-23-3
City State Zip Code Chandler AZ 85248-2642	Amount of Each Receipt this Period 23.35	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation GENERAL SURGEON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 554.20	

SUBTOTAL of Receipts This Page (optional) ▶	70.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Catherine Baldini		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 6418 Central Avenue		Transaction ID: 20071029-10530-23-3	
City State Zip Code Sea Isle City NJ 08243-1469		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation BUSINESS PROJECT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Catherine Baldini		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 6418 Central Avenue		Transaction ID: 20071112-10499-23-3	
City State Zip Code Sea Isle City NJ 08243-1469		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation BUSINESS PROJECT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Catherine Baldini		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 6418 Central Avenue		Transaction ID: 20071126-10481-23-3	
City State Zip Code Sea Isle City NJ 08243-1469		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation BUSINESS PROJECT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Thomas C Banet

Mailing Address 10558 Fox Forest Drive

City State Zip Code
Great Falls VA 22066-1743

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE SENIOR SALES REPRESENTATIVE
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-5522-23-3

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Thomas C Banet

Mailing Address 10558 Fox Forest Drive

City State Zip Code
Great Falls VA 22066-1743

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE SENIOR SALES REPRESENTATIVE
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-5506-23-3

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Thomas C Banet

Mailing Address 10558 Fox Forest Drive

City State Zip Code
Great Falls VA 22066-1743

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE SENIOR SALES REPRESENTATIVE
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-5499-23-3

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Rosemary B Bartley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 2958 Bartelmy Lane		Transaction ID: 20071029-8205-23-3
City State Zip Code Saint Paul MN 55109-1518	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.	Occupation ADMIN SVCS SR SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Rosemary B Bartley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 2958 Bartelmy Lane		Transaction ID: 20071112-8187-23-3
City State Zip Code Saint Paul MN 55109-1518	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.	Occupation ADMIN SVCS SR SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Rosemary B Bartley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 2958 Bartelmy Lane		Transaction ID: 20071126-8176-23-3
City State Zip Code Saint Paul MN 55109-1518	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.	Occupation ADMIN SVCS SR SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Michael Bell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2126 Inverness Lane		Transaction ID: 20071029-5930-23-3	
City State Zip Code Berwyn PA 19312-1992	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation EVP CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) B. Michael Bell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2126 Inverness Lane		Transaction ID: 20071112-5915-23-3	
City State Zip Code Berwyn PA 19312-1992	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation EVP CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) C. Michael Bell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2126 Inverness Lane		Transaction ID: 20071126-5907-23-3	
City State Zip Code Berwyn PA 19312-1992	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation EVP CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. John M Belsen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 10 Brookview Circle		Transaction ID: 20071029-2107-23-3
City Windsor Locks State CT Zip Code 06096-1872	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION Occupation TREASURY MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. John M Belsen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 10 Brookview Circle		Transaction ID: 20071112-2102-23-3
City Windsor Locks State CT Zip Code 06096-1872	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION Occupation TREASURY MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. John M Belsen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 10 Brookview Circle		Transaction ID: 20071126-2102-23-3
City Windsor Locks State CT Zip Code 06096-1872	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION Occupation TREASURY MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jodi M Berry		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 208 W Lake Cove		Transaction ID: 20071029-9551-23-3
City McDonough	State GA	Zip Code 30252-6615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.09
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.14	

Full Name (Last, First, Middle Initial) B. Jodi M Berry		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 208 W Lake Cove		Transaction ID: 20071112-9528-23-3
City McDonough	State GA	Zip Code 30252-6615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.09
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.14	

Full Name (Last, First, Middle Initial) C. Jodi M Berry		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 208 W Lake Cove		Transaction ID: 20071126-9515-23-3
City McDonough	State GA	Zip Code 30252-6615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7.97
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.14	

SUBTOTAL of Receipts This Page (optional)	▶	14.15
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 195
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Gail M Billet		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 3 Willow Lane		Transaction ID: 20071029-2540-23-3	
City Farmington	State CT	Zip Code 06032-2336	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Gail M Billet		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 3 Willow Lane		Transaction ID: 20071112-2533-23-3	
City Farmington	State CT	Zip Code 06032-2336	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Gail M Billet		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 3 Willow Lane		Transaction ID: 20071126-2533-23-3	
City Farmington	State CT	Zip Code 06032-2336	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	30.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Paul B Borgesen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 7022 W Kimberly Way		Transaction ID: 20071029-8382-23-3
City State Zip Code Glendale AZ 85308-5758	Amount of Each Receipt this Period 22.04	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation OTOLARYNGOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.96	

Full Name (Last, First, Middle Initial) B. Paul B Borgesen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 7022 W Kimberly Way		Transaction ID: 20071112-8363-23-3
City State Zip Code Glendale AZ 85308-5758	Amount of Each Receipt this Period 22.04	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation OTOLARYNGOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.96	

Full Name (Last, First, Middle Initial) C. Paul B Borgesen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 7022 W Kimberly Way		Transaction ID: 20071126-8351-23-3
City State Zip Code Glendale AZ 85308-5758	Amount of Each Receipt this Period 22.04	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation OTOLARYNGOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.96	

SUBTOTAL of Receipts This Page (optional) ▶	66.12
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Susan J Bousquet		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 3390 Johnston Road		Transaction ID: 20071112-2592-23-3	
City State Zip Code Winston GA 30187-1076	Amount of Each Receipt this Period 9.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00		

Full Name (Last, First, Middle Initial) B. Susan J Bousquet		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 3390 Johnston Road		Transaction ID: 20071126-2591-23-3	
City State Zip Code Winston GA 30187-1076	Amount of Each Receipt this Period 9.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00		

Full Name (Last, First, Middle Initial) C. Kenneth T Bowden		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 65 Satari Drive		Transaction ID: 20071029-2535-23-3	
City State Zip Code Coventry CT 06238-1000	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 18 / 195
	(check only one)	
	<input checked="" 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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Kenneth T Bowden		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 65 Satari Drive		Transaction ID: 20071112-2528-23-3
City State Zip Code Coventry CT 06238-1000	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION	Occupation SENIOR COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Kenneth T Bowden		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 65 Satari Drive		Transaction ID: 20071126-2528-23-3
City State Zip Code Coventry CT 06238-1000	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION	Occupation SENIOR COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Patricia A Brown		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 405 W Kings Avenue		Transaction ID: 20071029-8372-23-3
City State Zip Code Phoenix AZ 85023-3541	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	30.00
TOTAL This Period (last page this line number only) ▶	30.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Patricia A Brown		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 405 W Kings Avenue		Transaction ID: 20071112-8353-23-3
City State Zip Code Phoenix AZ 85023-3541	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Patricia A Brown		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 405 W Kings Avenue		Transaction ID: 20071126-8341-23-3
City State Zip Code Phoenix AZ 85023-3541	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Zigmund R Brzezinski		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 15 Olden Drive		Transaction ID: 20071029-3544-23-3
City State Zip Code Flemington NJ 08822-1978	Amount of Each Receipt this Period 13.73	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.01	

SUBTOTAL of Receipts This Page (optional) ▶	33.73
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Zigmund R Brzezinski		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 15 Olden Drive		Transaction ID: 20071112-3533-23-3
City State Zip Code Flemington NJ 08822-1978	Amount of Each Receipt this Period 13.73	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.01	

Full Name (Last, First, Middle Initial) B. Zigmund R Brzezinski		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 15 Olden Drive		Transaction ID: 20071126-3530-23-3
City State Zip Code Flemington NJ 08822-1978	Amount of Each Receipt this Period 13.73	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.01	

Full Name (Last, First, Middle Initial) C. M. L Buckley		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 3651 N Leavitt Street		Transaction ID: 20071029-6023-23-3
City State Zip Code Chicago IL 60618-4821	Amount of Each Receipt this Period 9.62	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 728.04	

SUBTOTAL of Receipts This Page (optional) ▶	37.08
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. M. L Buckley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 3651 N Leavitt Street		Transaction ID: 20071112-6008-23-3	
City State Zip Code Chicago IL 60618-4821	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 728.04		

Full Name (Last, First, Middle Initial) B. M. L Buckley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 3651 N Leavitt Street		Transaction ID: 20071126-6000-23-3	
City State Zip Code Chicago IL 60618-4821	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 728.04		

Full Name (Last, First, Middle Initial) C. Dennis F Cain		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 216 Lorraine Avenue		Transaction ID: 20071126-3185-23-3	
City State Zip Code Oreland PA 19075-1702	Amount of Each Receipt this Period 8.75		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation COMPLIANCE SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.62		

SUBTOTAL of Receipts This Page (optional) ▶	27.99
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Gregory Cain		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 3802 Highland Drive		Transaction ID: 20071029-11511-23-3
City State Zip Code Boothwyn PA 19061-1861	Amount of Each Receipt this Period 11.05	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation HEALTH SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.20	

Full Name (Last, First, Middle Initial) B. Gregory Cain		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 3802 Highland Drive		Transaction ID: 20071112-11478-23-3
City State Zip Code Boothwyn PA 19061-1861	Amount of Each Receipt this Period 11.05	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation HEALTH SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.20	

Full Name (Last, First, Middle Initial) C. Gregory Cain		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 3802 Highland Drive		Transaction ID: 20071126-11458-23-3
City State Zip Code Boothwyn PA 19061-1861	Amount of Each Receipt this Period 11.05	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation HEALTH SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.20	

SUBTOTAL of Receipts This Page (optional) ▶	33.15
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. John Cannon		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address PO Box 226		Transaction ID: 20071029-3166-23-3	
City Solebury	State PA	Zip Code 18963-0226	Amount of Each Receipt this Period 96.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation SVP CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2304.00		

Full Name (Last, First, Middle Initial) B. John Cannon		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address PO Box 226		Transaction ID: 20071112-3156-23-3	
City Solebury	State PA	Zip Code 18963-0226	Amount of Each Receipt this Period 96.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation SVP CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2304.00		

Full Name (Last, First, Middle Initial) C. John Cannon		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address PO Box 226		Transaction ID: 20071126-3155-23-3	
City Solebury	State PA	Zip Code 18963-0226	Amount of Each Receipt this Period 96.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation SVP CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2304.00		

SUBTOTAL of Receipts This Page (optional) ▶	288.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. John S Cantrell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 6035 Fairway Avenue		Transaction ID: 20071029-7821-23-3
City State Zip Code Dallas TX 75227-6210	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation CORPORATE SECURITY SR SPEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. John S Cantrell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 6035 Fairway Avenue		Transaction ID: 20071112-7805-23-3
City State Zip Code Dallas TX 75227-6210	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation CORPORATE SECURITY SR SPEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. John S Cantrell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 6035 Fairway Avenue		Transaction ID: 20071126-7794-23-3
City State Zip Code Dallas TX 75227-6210	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation CORPORATE SECURITY SR SPEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
William C Carlson

Mailing Address 99 Westmont Street

City State Zip Code
West Hartford CT 06117-2929

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO EQUITY SENIOR MANAGING DIR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 528.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2007

Transaction ID: 20071029-911-23-3

Amount of Each Receipt this Period
22.00

B. Full Name (Last, First, Middle Initial)
William C Carlson

Mailing Address 99 Westmont Street

City State Zip Code
West Hartford CT 06117-2929

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO EQUITY SENIOR MANAGING DIR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 528.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: 20071112-910-23-3

Amount of Each Receipt this Period
22.00

C. Full Name (Last, First, Middle Initial)
William C Carlson

Mailing Address 99 Westmont Street

City State Zip Code
West Hartford CT 06117-2929

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO EQUITY SENIOR MANAGING DIR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 528.00

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: 20071126-909-23-3

Amount of Each Receipt this Period
22.00

SUBTOTAL of Receipts This Page (optional)	▶	66.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Kenneth B Carter		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2160 El Cajonita Drive		Transaction ID: 20071029-8841-23-3	
City State Zip Code La Habra Heights CA 90631-7726	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

Full Name (Last, First, Middle Initial) B. Kenneth B Carter		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2160 El Cajonita Drive		Transaction ID: 20071112-8819-23-3	
City State Zip Code La Habra Heights CA 90631-7726	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

Full Name (Last, First, Middle Initial) C. Kenneth B Carter		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2160 El Cajonita Drive		Transaction ID: 20071126-8807-23-3	
City State Zip Code La Habra Heights CA 90631-7726	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

SUBTOTAL of Receipts This Page (optional) ▶	28.86
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 195						
	(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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Charles R Catalano		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 28 William Penn Road		Transaction ID: 20071029-2210-23-3	
City Warren	State NJ	Zip Code 07059-5038	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Charles R Catalano		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 28 William Penn Road		Transaction ID: 20071112-2205-23-3	
City Warren	State NJ	Zip Code 07059-5038	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Charles R Catalano		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 28 William Penn Road		Transaction ID: 20071126-2205-23-3	
City Warren	State NJ	Zip Code 07059-5038	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jeffrey L Chambers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 215 Camellia Court		Transaction ID: 20071126-7942-23-3	
City State Zip Code Franklin TN 37064-6177	Amount of Each Receipt this Period 8.64		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.36		

Full Name (Last, First, Middle Initial) B. Patricia A Charnley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 6515 Regatta Lane		Transaction ID: 20071029-4630-23-3	
City State Zip Code Charlotte NC 28227-8079	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SERVICE SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Patricia A Charnley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 6515 Regatta Lane		Transaction ID: 20071112-4616-23-3	
City State Zip Code Charlotte NC 28227-8079	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SERVICE SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	28.64
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Patricia A Charnley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 6515 Regatta Lane		Transaction ID: 20071126-4614-23-3	
City State Zip Code Charlotte NC 28227-8079	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SERVICE SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Clement J Cheng		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 517 Wildflower Lane		Transaction ID: 20071029-11717-23-3	
City State Zip Code Media PA 19063-1671	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation HR SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Clement J Cheng		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 517 Wildflower Lane		Transaction ID: 20071112-11684-23-3	
City State Zip Code Media PA 19063-1671	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation HR SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 30 / 195
	<input checked="" 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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Clement J Cheng		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 517 Wildflower Lane		Transaction ID: 20071126-11664-23-3	
City State Zip Code Media PA 19063-1671	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation HR SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Percy W Christian		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 55 Trent Drive		Transaction ID: 20071029-501-23-3	
City State Zip Code Windsor CT 06095-2339	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation STRATEGIC SOURCING SR SPEC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Percy W Christian		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 55 Trent Drive		Transaction ID: 20071112-500-23-3	
City State Zip Code Windsor CT 06095-2339	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation STRATEGIC SOURCING SR SPEC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Percy W Christian		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 55 Trent Drive		Transaction ID: 20071126-500-23-3	
City Windsor	State CT	Zip Code 06095-2339	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation STRATEGIC SOURCING SR SPEC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Janice J Cobb		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2341 Stonesage Road		Transaction ID: 20071029-6105-23-3	
City Soddy Daisy	State TN	Zip Code 37379-3647	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CUSTOMER SERVICE MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Janice J Cobb		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2341 Stonesage Road		Transaction ID: 20071112-6092-23-3	
City Soddy Daisy	State TN	Zip Code 37379-3647	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CUSTOMER SERVICE MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 195
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Janice J Cobb		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2341 Stonesage Road		Transaction ID: 20071126-6084-23-3	
City State Zip Code Soddy Daisy TN 37379-3647	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CUSTOMER SERVICE MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Peter M Coen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 521 E 83rd Street Apt. 5R		Transaction ID: 20071029-2560-23-3	
City State Zip Code New York NY 10028-7222	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR SALES REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Peter M Coen		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 521 E 83rd Street Apt. 5R		Transaction ID: 20071112-2553-23-3	
City State Zip Code New York NY 10028-7222	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR SALES REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Peter M Coen		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 521 E 83rd Street Apt. 5R		Transaction ID: 20071126-2552-23-3	
City State Zip Code New York NY 10028-7222		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SENIOR SALES REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Christophe M Coloian		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 36 Ruth Circle		Transaction ID: 20071029-12120-23-3	
City State Zip Code Malvern PA 19355-3188		Amount of Each Receipt this Period 12.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation MEDICAL PROGRAM SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 288.00	

Full Name (Last, First, Middle Initial) C. Christophe M Coloian		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 36 Ruth Circle		Transaction ID: 20071112-12086-23-3	
City State Zip Code Malvern PA 19355-3188		Amount of Each Receipt this Period 12.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation MEDICAL PROGRAM SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 288.00	

SUBTOTAL of Receipts This Page (optional) ▶	34.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Christophe M Coloian		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 36 Ruth Circle		Transaction ID: 20071126-12063-23-3	
City State Zip Code Malvern PA 19355-3188		Amount of Each Receipt this Period 12.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation MEDICAL PROGRAM SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 288.00	

Full Name (Last, First, Middle Initial) B. David M Cordani		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 32 Lucy Way		Transaction ID: 20071029-606-23-3	
City State Zip Code Simsbury CT 06070-2527		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SVP CUSTOMER SEGMENT & MKTG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 840.00	

Full Name (Last, First, Middle Initial) C. David M Cordani		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 32 Lucy Way		Transaction ID: 20071112-605-23-3	
City State Zip Code Simsbury CT 06070-2527		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SVP CUSTOMER SEGMENT & MKTG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 840.00	

SUBTOTAL of Receipts This Page (optional) ▶	82.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) David M Cordani		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 32 Lucy Way		Transaction ID: 20071126-605-23-3	
City Simsbury	State CT	Amount of Each Receipt this Period 35.00	
Zip Code 06070-2527			
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SVP CUSTOMER SEGMENT & MKTG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00		

B. Full Name (Last, First, Middle Initial) Andrew D Crooks		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 323 Turtle Trail		Transaction ID: 20071029-11709-23-3	
City Lake Mary	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 32746-3619			
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL 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) Andrew D Crooks		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 323 Turtle Trail		Transaction ID: 20071112-11676-23-3	
City Lake Mary	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 32746-3619			
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Andrew D Crooks		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 323 Turtle Trail		Transaction ID: 20071126-11656-23-3
City State Zip Code Lake Mary FL 32746-3619	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Johannes M De Jong		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address 6122 McCallum Street		Transaction ID: 20071029-290-23-3
City State Zip Code Philadelphia PA 19144-2604	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Johannes M De Jong		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 6122 McCallum Street		Transaction ID: 20071112-289-23-3
City State Zip Code Philadelphia PA 19144-2604	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Johannes M De Jong		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 6122 McCallum Street		Transaction ID: 20071126-289-23-3
City Philadelphia	State PA	Zip Code 19144-2604
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Christophe De Rosa		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address 15 St. Michaels Court		Transaction ID: 20071029-2111-23-3
City Avon	State CT	Zip Code 06001-3187
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Christophe De Rosa		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 15 St. Michaels Court		Transaction ID: 20071112-2106-23-3
City Avon	State CT	Zip Code 06001-3187
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Christophe De Rosa		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 15 St. Michaels Court		Transaction ID: 20071126-2106-23-3	
City State Zip Code Avon CT 06001-3187	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Edwin J Detrick		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 17 Swallow Road		Transaction ID: 20071029-3380-23-3	
City State Zip Code Holland PA 18966-1951	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP INVESTOR RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) C. Edwin J Detrick		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 17 Swallow Road		Transaction ID: 20071112-3370-23-3	
City State Zip Code Holland PA 18966-1951	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP INVESTOR RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional) ▶	50.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Edwin J Detrick

Mailing Address 17 Swallow Road

City State Zip Code
Holland PA 18966-1951

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

Name of Employer Occupation
CIGNA CORPORATION VP INVESTOR RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: 20071126-3368-23-3

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Keith Dixon

Mailing Address 1715 Morgan Avenue S

City State Zip Code
Minneapolis MN 55405-2205

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

Name of Employer Occupation
CIGNA BEHAVIORAL HEALTH, INC. PRESIDENT BEHAVIORAL HEALTH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2007

Transaction ID: 20071029-8096-23-3

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Keith Dixon

Mailing Address 1715 Morgan Avenue S

City State Zip Code
Minneapolis MN 55405-2205

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

Name of Employer Occupation
CIGNA BEHAVIORAL HEALTH, INC. PRESIDENT BEHAVIORAL HEALTH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: 20071112-8079-23-3

Amount of Each Receipt this Period
25.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Keith Dixon

Mailing Address 1715 Morgan Avenue S

City State Zip Code
Minneapolis MN 55405-2205

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

Name of Employer Occupation
CIGNA BEHAVIORAL HEALTH, INC. PRESIDENT BEHAVIORAL HEALTH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-8068-23-3

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Jeannine Doherty

Mailing Address 15038 N 43rd Street

City State Zip Code
Phoenix AZ 85032-8107

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO SENIOR ACCOUNT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 537.17

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-41-23-3

Amount of Each Receipt this Period
6.13

C. Full Name (Last, First, Middle Initial)
Jeannine Doherty

Mailing Address 15038 N 43rd Street

City State Zip Code
Phoenix AZ 85032-8107

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO SENIOR ACCOUNT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 537.17

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-41-23-3

Amount of Each Receipt this Period
6.13

SUBTOTAL of Receipts This Page (optional)	▶	37.26
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jeannine Doherty		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 15038 N 43rd Street		Transaction ID: 20071126-41-23-3
City State Zip Code Phoenix AZ 85032-8107	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 6.13
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 537.17	

Full Name (Last, First, Middle Initial) B. Lisa A Douglas		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 773 Palisado Avenue		Transaction ID: 20071029-408-23-3
City State Zip Code Windsor CT 06095-2029	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 14.78
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKETING PRODUCT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.93	

Full Name (Last, First, Middle Initial) C. Lisa A Douglas		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 773 Palisado Avenue		Transaction ID: 20071112-407-23-3
City State Zip Code Windsor CT 06095-2029	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 14.78
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKETING PRODUCT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.93	

SUBTOTAL of Receipts This Page (optional)	▶	35.69
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Lisa A Douglas		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 773 Palisado Avenue		Transaction ID: 20071126-407-23-3	
City Windsor State CT Zip Code 06095-2029	Amount of Each Receipt this Period 14.78		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKETING PRODUCT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.93		

Full Name (Last, First, Middle Initial) B. Edward L Du Brow		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 38 W Hayward Avenue		Transaction ID: 20071029-1710-23-3	
City Phoenix State AZ Zip Code 85021-7221	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Edward L Du Brow		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 38 W Hayward Avenue		Transaction ID: 20071112-1706-23-3	
City Phoenix State AZ Zip Code 85021-7221	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	34.78
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Edward L Du Brow		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 38 W Hayward Avenue		Transaction ID: 20071126-1706-23-3	
City State Zip Code Phoenix AZ 85021-7221	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Andrew M Dunn		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 46 Mountain View Drive		Transaction ID: 20071029-976-23-3	
City State Zip Code West Hartford CT 06117-3029	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation UNDERWRITING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Andrew M Dunn		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 46 Mountain View Drive		Transaction ID: 20071112-975-23-3	
City State Zip Code West Hartford CT 06117-3029	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation UNDERWRITING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Andrew M Dunn		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 46 Mountain View Drive		Transaction ID: 20071126-973-23-3
City State Zip Code West Hartford CT 06117-3029	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation UNDERWRITING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Karen A Easterly-Behrens		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 18332 Meridian Avenue N		Transaction ID: 20071029-4171-23-3
City State Zip Code Shoreline WA 98133-4650	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation CASE MANAGER SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Karen A Easterly-Behrens		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 18332 Meridian Avenue N		Transaction ID: 20071112-4157-23-3
City State Zip Code Shoreline WA 98133-4650	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation CASE MANAGER SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	30.00
TOTAL This Period (last page this line number only) ▶	30.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Karen A Easterly-Behrens		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 18332 Meridian Avenue N		Transaction ID: 20071126-4154-23-3	
City State Zip Code Shoreline WA 98133-4650	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation CASE MANAGER SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Daryl W Edmonds		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 9211 Sand Hill Street		Transaction ID: 20071029-8455-23-3	
City State Zip Code Highlands Ranch CO 80126-5219	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Daryl W Edmonds		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 9211 Sand Hill Street		Transaction ID: 20071112-8436-23-3	
City State Zip Code Highlands Ranch CO 80126-5219	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Daryl W Edmonds

Mailing Address 9211 Sand Hill Street

City State Zip Code
Highlands Ranch CO 80126-5219

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE GENERAL MANAGER
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-8424-23-3

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
John G Eisele

Mailing Address 43 Windham Drive

City State Zip Code
Simsbury CT 06070-1227

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE REAL ESTATE MANAGING DIRECTOR
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-6207-23-3

Amount of Each Receipt this Period
11.00

C. Full Name (Last, First, Middle Initial)
John G Eisele

Mailing Address 43 Windham Drive

City State Zip Code
Simsbury CT 06070-1227

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE REAL ESTATE MANAGING DIRECTOR
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-6193-23-3

Amount of Each Receipt this Period
11.00

SUBTOTAL of Receipts This Page (optional)	▶	47.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. John G Eisele		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 43 Windham Drive		Transaction ID: 20071126-6185-23-3
City Simsbury	State CT	Zip Code 06070-1227
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation REAL ESTATE MANAGING DIRECTOR	
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. Lisa L Ellis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 1510 Ramsgate Parkway		Transaction ID: 20071029-4850-23-3
City Hixson	State TN	Zip Code 37343-2569
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Lisa L Ellis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 1510 Ramsgate Parkway		Transaction ID: 20071112-4833-23-3
City Hixson	State TN	Zip Code 37343-2569
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	31.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Lisa L Ellis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 1510 Ramsgate Parkway		Transaction ID: 20071126-4830-23-3	
City Hixson	State TN	Zip Code 37343-2569	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation OPERATIONS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Brian Evanko		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 5 Pratt Farm Road		Transaction ID: 20071112-2292-23-3	
City North Granby	State CT	Zip Code 06060-1218	Amount of Each Receipt this Period 8.89
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACTUARIAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.36		

Full Name (Last, First, Middle Initial) C. Brian Evanko		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 5 Pratt Farm Road		Transaction ID: 20071126-2292-23-3	
City North Granby	State CT	Zip Code 06060-1218	Amount of Each Receipt this Period 8.89
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACTUARIAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.36		

SUBTOTAL of Receipts This Page (optional) ▶	27.78
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Beverly J Everett		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 3826 Casey Leigh Lane		Transaction ID: 20071029-131-23-3
City Raleigh State NC Zip Code 27612-4258	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Beverly J Everett		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 3826 Casey Leigh Lane		Transaction ID: 20071112-131-23-3
City Raleigh State NC Zip Code 27612-4258	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Beverly J Everett		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 3826 Casey Leigh Lane		Transaction ID: 20071126-131-23-3
City Raleigh State NC Zip Code 27612-4258	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Robert Fair		Date of Receipt
Mailing Address 1758 Boulevard		M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
City State Zip Code West Hartford CT 06107-2818		Transaction ID: 20071029-287-23-3
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INVESTMENT MANAGING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

B. Full Name (Last, First, Middle Initial) Robert Fair		Date of Receipt
Mailing Address 1758 Boulevard		M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
City State Zip Code West Hartford CT 06107-2818		Transaction ID: 20071112-286-23-3
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INVESTMENT MANAGING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

C. Full Name (Last, First, Middle Initial) Robert Fair		Date of Receipt
Mailing Address 1758 Boulevard		M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
City State Zip Code West Hartford CT 06107-2818		Transaction ID: 20071126-286-23-3
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INVESTMENT MANAGING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. David Ferriss		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 6325 Wescates Court		Transaction ID: 20071029-10892-23-3 Amount of Each Receipt this Period 25.00
City State Zip Code Brentwood TN 37027-5648		
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. David Ferriss		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 6325 Wescates Court		Transaction ID: 20071112-10861-23-3 Amount of Each Receipt this Period 25.00
City State Zip Code Brentwood TN 37027-5648		
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. David Ferriss		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 6325 Wescates Court		Transaction ID: 20071126-10843-23-3 Amount of Each Receipt this Period 25.00
City State Zip Code Brentwood TN 37027-5648		
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert C Flores		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 5401 E Lewis Avenue		Transaction ID: 20071029-12623-23-3	
City State Zip Code Phoenix AZ 85008-2615	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation MEDICAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

Full Name (Last, First, Middle Initial) B. Robert C Flores		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 5401 E Lewis Avenue		Transaction ID: 20071112-12586-23-3	
City State Zip Code Phoenix AZ 85008-2615	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation MEDICAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

Full Name (Last, First, Middle Initial) C. Robert C Flores		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 5401 E Lewis Avenue		Transaction ID: 20071126-12563-23-3	
City State Zip Code Phoenix AZ 85008-2615	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation MEDICAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

SUBTOTAL of Receipts This Page (optional) ▶	28.86
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard H Forde		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 5 Brighton Lane		Transaction ID: 20071029-1142-23-3
City State Zip Code Simsbury CT 06070-1543	Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SVP CHIEF INVESTMENT OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1530.00	

Full Name (Last, First, Middle Initial) B. Richard H Forde		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 5 Brighton Lane		Transaction ID: 20071112-1141-23-3
City State Zip Code Simsbury CT 06070-1543	Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SVP CHIEF INVESTMENT OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1530.00	

Full Name (Last, First, Middle Initial) C. Richard H Forde		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 5 Brighton Lane		Transaction ID: 20071126-1140-23-3
City State Zip Code Simsbury CT 06070-1543	Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SVP CHIEF INVESTMENT OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1530.00	

SUBTOTAL of Receipts This Page (optional) ▶	270.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 195
	(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"/> 15
<input type="checkbox"/> 12	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert S Fry

Mailing Address 1004 Beech Bay Road

City State Zip Code
Poplar Grove IL 61065-8242

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE GENERAL MANAGER
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-3794-23-3

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Robert S Fry

Mailing Address 1004 Beech Bay Road

City State Zip Code
Poplar Grove IL 61065-8242

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE GENERAL MANAGER
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-3782-23-3

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Robert S Fry

Mailing Address 1004 Beech Bay Road

City State Zip Code
Poplar Grove IL 61065-8242

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE GENERAL MANAGER
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-3778-23-3

Amount of Each Receipt this Period
20.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Thomas Garvey		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 31 Lakeshore Drive		Transaction ID: 20071029-2673-23-3
City State Zip Code Rockaway NJ 07866-1405	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING SR DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Thomas Garvey		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 31 Lakeshore Drive		Transaction ID: 20071112-2666-23-3
City State Zip Code Rockaway NJ 07866-1405	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING SR DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Thomas Garvey		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 31 Lakeshore Drive		Transaction ID: 20071126-2665-23-3
City State Zip Code Rockaway NJ 07866-1405	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING SR DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven W Geltmaker

Mailing Address 4561 E Tierra Buena Lane

City State Zip Code
Phoenix AZ 85032-8410

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE UNDERWRITING DIRECTOR
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-5638-23-3

Amount of Each Receipt this Period
9.17

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

Mailing Address 4561 E Tierra Buena Lane

City State Zip Code
Phoenix AZ 85032-8410

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE UNDERWRITING DIRECTOR
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-5622-23-3

Amount of Each Receipt this Period
9.17

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

Mailing Address 4561 E Tierra Buena Lane

City State Zip Code
Phoenix AZ 85032-8410

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE UNDERWRITING DIRECTOR
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-5614-23-3

Amount of Each Receipt this Period
9.17

SUBTOTAL of Receipts This Page (optional)	▶	27.51
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. David J Giannoni		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 2030 James Farm Road		Transaction ID: 20071029-5412-23-3
City State Zip Code Stratford CT 06614-1071	Amount of Each Receipt this Period 6.87	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.74	

Full Name (Last, First, Middle Initial) B. David J Giannoni		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 2030 James Farm Road		Transaction ID: 20071112-5395-23-3
City State Zip Code Stratford CT 06614-1071	Amount of Each Receipt this Period 6.73	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.74	

Full Name (Last, First, Middle Initial) C. David J Giannoni		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 2030 James Farm Road		Transaction ID: 20071126-5388-23-3
City State Zip Code Stratford CT 06614-1071	Amount of Each Receipt this Period 8.93	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.74	

SUBTOTAL of Receipts This Page (optional) ▶	22.53
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Kathryn Gies		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 10130 E Powers Avenue		Transaction ID: 20071029-8504-23-3
City State Zip Code Greenwood Village CO 80111-3754	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation QUALITY MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Kathryn Gies		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 10130 E Powers Avenue		Transaction ID: 20071112-8485-23-3
City State Zip Code Greenwood Village CO 80111-3754	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation QUALITY MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Kathryn Gies		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 10130 E Powers Avenue		Transaction ID: 20071126-8473-23-3
City State Zip Code Greenwood Village CO 80111-3754	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation QUALITY MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Paul J Gontarek		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 7442 Devon Street		Transaction ID: 20071029-3943-23-3
City State Zip Code Philadelphia PA 19119-1018	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Paul J Gontarek		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 7442 Devon Street		Transaction ID: 20071112-3930-23-3
City State Zip Code Philadelphia PA 19119-1018	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Paul J Gontarek		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 7442 Devon Street		Transaction ID: 20071126-3927-23-3
City State Zip Code Philadelphia PA 19119-1018	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. David A Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 121 Grandview Drive		Transaction ID: 20071029-1402-23-3	
City State Zip Code Glastonbury CT 06033-3937	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation VP PRODUCT LEADER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

Full Name (Last, First, Middle Initial) B. David A Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 121 Grandview Drive		Transaction ID: 20071112-1402-23-3	
City State Zip Code Glastonbury CT 06033-3937	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation VP PRODUCT LEADER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

Full Name (Last, First, Middle Initial) C. David A Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 121 Grandview Drive		Transaction ID: 20071126-1403-23-3	
City State Zip Code Glastonbury CT 06033-3937	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation VP PRODUCT LEADER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Donna W Gore		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 12 Scarborough Road		Transaction ID: 20071029-273-23-3
City Windsor State CT Zip Code 06095-3736	Amount of Each Receipt this Period 10.82	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.23	

Full Name (Last, First, Middle Initial) B. Donna W Gore		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 12 Scarborough Road		Transaction ID: 20071112-272-23-3
City Windsor State CT Zip Code 06095-3736	Amount of Each Receipt this Period 10.82	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.23	

Full Name (Last, First, Middle Initial) C. Donna W Gore		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 12 Scarborough Road		Transaction ID: 20071126-272-23-3
City Windsor State CT Zip Code 06095-3736	Amount of Each Receipt this Period 10.82	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.23	

SUBTOTAL of Receipts This Page (optional) ▶	32.46
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Mark A Gosselin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 48 Brian Drive		Transaction ID: 20071029-869-23-3	
City Hebron	State CT	Zip Code 06248-1238	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation APP DEVELOPMENT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Mark A Gosselin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 48 Brian Drive		Transaction ID: 20071112-868-23-3	
City Hebron	State CT	Zip Code 06248-1238	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation APP DEVELOPMENT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Mark A Gosselin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 48 Brian Drive		Transaction ID: 20071126-867-23-3	
City Hebron	State CT	Zip Code 06248-1238	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation APP DEVELOPMENT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard Gray		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 239 Ballard Drive		Transaction ID: 20071029-2553-23-3	
City State Zip Code West Hartford CT 06119-1006	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation STRAT AND BUS DEVELOP SR DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Richard Gray		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 239 Ballard Drive		Transaction ID: 20071112-2546-23-3	
City State Zip Code West Hartford CT 06119-1006	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation STRAT AND BUS DEVELOP SR DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Richard Gray		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 239 Ballard Drive		Transaction ID: 20071126-2545-23-3	
City State Zip Code West Hartford CT 06119-1006	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation STRAT AND BUS DEVELOP SR DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jared Gross		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2017 Boulevard		Transaction ID: 20071029-310-23-3	
City State Zip Code West Hartford CT 06107-2805	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACTUARIAL SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Jared Gross		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2017 Boulevard		Transaction ID: 20071112-309-23-3	
City State Zip Code West Hartford CT 06107-2805	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACTUARIAL SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Jared Gross		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2017 Boulevard		Transaction ID: 20071126-309-23-3	
City State Zip Code West Hartford CT 06107-2805	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACTUARIAL SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Ronald E Habros		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 10800 N 101st Way		Transaction ID: 20071029-6135-23-3	
City State Zip Code Scottsdale AZ 85260-6332	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Ronald E Habros		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 10800 N 101st Way		Transaction ID: 20071112-6122-23-3	
City State Zip Code Scottsdale AZ 85260-6332	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Ronald E Habros		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 10800 N 101st Way		Transaction ID: 20071126-6114-23-3	
City State Zip Code Scottsdale AZ 85260-6332	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Douglas R Hadley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 301 Glen Echo Lane Apt. B		Transaction ID: 20071029-8848-23-3
City State Zip Code Cary NC 27511-9680	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation NATIONAL MEDICAL SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) B. Douglas R Hadley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 301 Glen Echo Lane Apt. B		Transaction ID: 20071112-8826-23-3
City State Zip Code Cary NC 27511-9680	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation NATIONAL MEDICAL SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. Douglas R Hadley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 301 Glen Echo Lane Apt. B		Transaction ID: 20071126-8814-23-3
City State Zip Code Cary NC 27511-9680	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation NATIONAL MEDICAL SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	60.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Anmarie T Hagan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 113 Waterwillow Road		Transaction ID: 20071029-11891-23-3
City State Zip Code West Chester PA 19380-2111	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00
Name of Employer CIGNA CORPORATION	Occupation VP CHIEF ACCOUNTING OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Anmarie T Hagan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 113 Waterwillow Road		Transaction ID: 20071112-11857-23-3
City State Zip Code West Chester PA 19380-2111	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00
Name of Employer CIGNA CORPORATION	Occupation VP CHIEF ACCOUNTING OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Anmarie T Hagan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 113 Waterwillow Road		Transaction ID: 20071126-11837-23-3
City State Zip Code West Chester PA 19380-2111	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00
Name of Employer CIGNA CORPORATION	Occupation VP CHIEF ACCOUNTING OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Michael R Halford		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 5400 Kincross Lane		Transaction ID: 20071029-7120-23-3	
City State Zip Code Charlotte NC 28277-8776		Amount of Each Receipt this Period 10.58	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation CLAIMS SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 253.92	

Full Name (Last, First, Middle Initial) B. Michael R Halford		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 5400 Kincross Lane		Transaction ID: 20071112-7107-23-3	
City State Zip Code Charlotte NC 28277-8776		Amount of Each Receipt this Period 10.58	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation CLAIMS SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 253.92	

Full Name (Last, First, Middle Initial) C. Michael R Halford		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 5400 Kincross Lane		Transaction ID: 20071126-7096-23-3	
City State Zip Code Charlotte NC 28277-8776		Amount of Each Receipt this Period 10.58	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation CLAIMS SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 253.92	

SUBTOTAL of Receipts This Page (optional) ▶	31.74
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Lynn Hamilton		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 221 Wolcott Hill Road		Transaction ID: 20071029-1053-23-3
City State Zip Code Wethersfield CT 06109-2030	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Lynn Hamilton		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 221 Wolcott Hill Road		Transaction ID: 20071112-1052-23-3
City State Zip Code Wethersfield CT 06109-2030	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Lynn Hamilton		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 221 Wolcott Hill Road		Transaction ID: 20071126-1050-23-3
City State Zip Code Wethersfield CT 06109-2030	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. H. E Hanway		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 1601 Chestnut St		Transaction ID: 20071029-3858-23-3
City State Zip Code Philadelphia PA 19192	Amount of Each Receipt this Period 192.30	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation CIGNA CORPORATION PRESIDENT & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3269.10	

Full Name (Last, First, Middle Initial) B. H. E Hanway		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 1601 Chestnut St		Transaction ID: 20071112-3845-23-3
City State Zip Code Philadelphia PA 19192	Amount of Each Receipt this Period 192.30	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation CIGNA CORPORATION PRESIDENT & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3269.10	

Full Name (Last, First, Middle Initial) C. H. E Hanway		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 1601 Chestnut St		Transaction ID: 20071126-3841-23-3
City State Zip Code Philadelphia PA 19192	Amount of Each Receipt this Period 192.30	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation CIGNA CORPORATION PRESIDENT & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3269.10	

SUBTOTAL of Receipts This Page (optional) ▶	576.90
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Ben K Haynes		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2 Collins View Road		Transaction ID: 20071029-5001-23-3	
City State Zip Code Canton CT 06019-3052		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation OPERATIONS SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

B. Full Name (Last, First, Middle Initial) Ben K Haynes		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2 Collins View Road		Transaction ID: 20071112-4984-23-3	
City State Zip Code Canton CT 06019-3052		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation OPERATIONS SENIOR DIRECTOR	
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) Ben K Haynes		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2 Collins View Road		Transaction ID: 20071126-4979-23-3	
City State Zip Code Canton CT 06019-3052		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation OPERATIONS SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Cheryl S Haynes

Mailing Address 5320 Sunnyvale Drive

City State Zip Code
Antioch TN 37013-5663

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE PROJECT MANAGEMENT SR SPEC
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-5074-23-3

Amount of Each Receipt this Period
11.00

B. Full Name (Last, First, Middle Initial)
Cheryl S Haynes

Mailing Address 5320 Sunnyvale Drive

City State Zip Code
Antioch TN 37013-5663

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE PROJECT MANAGEMENT SR SPEC
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-5057-23-3

Amount of Each Receipt this Period
11.00

C. Full Name (Last, First, Middle Initial)
Cheryl S Haynes

Mailing Address 5320 Sunnyvale Drive

City State Zip Code
Antioch TN 37013-5663

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE PROJECT MANAGEMENT SR SPEC
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-5052-23-3

Amount of Each Receipt this Period
11.00

SUBTOTAL of Receipts This Page (optional)	▶	33.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Thomas M Healy

Mailing Address 41 Bradley Corners Road

City Madison State CT Zip Code 06443-1724

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: CORPORATE SECURITY MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-2190-23-3

Amount of Each Receipt this Period
 10.00

B. Full Name (Last, First, Middle Initial)
Thomas M Healy

Mailing Address 41 Bradley Corners Road

City Madison State CT Zip Code 06443-1724

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: CORPORATE SECURITY MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-2185-23-3

Amount of Each Receipt this Period
 10.00

C. Full Name (Last, First, Middle Initial)
Thomas M Healy

Mailing Address 41 Bradley Corners Road

City Madison State CT Zip Code 06443-1724

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: CORPORATE SECURITY MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-2185-23-3

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Clay R Hedlund		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2504 Briarcrest Drive		Transaction ID: 20071029-8827-23-3	
City Irving State TX Zip Code 75063-3175	Amount of Each Receipt this Period 12.34		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA DENTAL HEALTH, INC.	Occupation DENTIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.91		

Full Name (Last, First, Middle Initial) B. Clay R Hedlund		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2504 Briarcrest Drive		Transaction ID: 20071112-8805-23-3	
City Irving State TX Zip Code 75063-3175	Amount of Each Receipt this Period 12.34		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA DENTAL HEALTH, INC.	Occupation DENTIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.91		

Full Name (Last, First, Middle Initial) C. Clay R Hedlund		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2504 Briarcrest Drive		Transaction ID: 20071126-8793-23-3	
City Irving State TX Zip Code 75063-3175	Amount of Each Receipt this Period 12.34		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA DENTAL HEALTH, INC.	Occupation DENTIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.91		

SUBTOTAL of Receipts This Page (optional) ▶	37.02
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Kathleen M Hockmuth		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 135 Brackett Road		Transaction ID: 20071029-704-23-3	
City Rye State NH Zip Code 03870-2044	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation COMPLIANCE SR DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Kathleen M Hockmuth		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 135 Brackett Road		Transaction ID: 20071112-703-23-3	
City Rye State NH Zip Code 03870-2044	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation COMPLIANCE SR DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Kathleen M Hockmuth		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 135 Brackett Road		Transaction ID: 20071126-703-23-3	
City Rye State NH Zip Code 03870-2044	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation COMPLIANCE SR DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert P Hockmuth		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 135 Brackett Road		Transaction ID: 20071029-983-23-3
City Rye State NH Zip Code 03870-2044	Amount of Each Receipt this Period 19.24	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.76	

Full Name (Last, First, Middle Initial) B. Robert P Hockmuth		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 135 Brackett Road		Transaction ID: 20071112-982-23-3
City Rye State NH Zip Code 03870-2044	Amount of Each Receipt this Period 19.24	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.76	

Full Name (Last, First, Middle Initial) C. Robert P Hockmuth		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 135 Brackett Road		Transaction ID: 20071126-980-23-3
City Rye State NH Zip Code 03870-2044	Amount of Each Receipt this Period 19.24	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.76	

SUBTOTAL of Receipts This Page (optional) ▶	57.72
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Robert S House Mailing Address 181 Reverknolls City Avon State CT Zip Code 06001-2054 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071029-1147-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>9.62</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	7	9.62
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		0	1		2	0	0	7														
9.62																							
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: FINANCIAL ANALYSIS SR DIR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>230.88</td> </tr> </table>		230.88																					
230.88																							

B. Full Name (Last, First, Middle Initial) Robert S House Mailing Address 181 Reverknolls City Avon State CT Zip Code 06001-2054 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071112-1146-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>9.62</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	7	9.62
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		1	5		2	0	0	7														
9.62																							
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: FINANCIAL ANALYSIS SR DIR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>230.88</td> </tr> </table>		230.88																					
230.88																							

C. Full Name (Last, First, Middle Initial) Robert S House Mailing Address 181 Reverknolls City Avon State CT Zip Code 06001-2054 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071126-1145-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>9.62</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	9		2	0	0	7	9.62
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		2	9		2	0	0	7														
9.62																							
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: FINANCIAL ANALYSIS SR DIR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>230.88</td> </tr> </table>		230.88																					
230.88																							

SUBTOTAL of Receipts This Page (optional)	28.86
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Dale Hovey		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 6 Westborough Drive		Transaction ID: 20071029-1195-23-3	
City State Zip Code Weatogue CT 06089-9786		Amount of Each Receipt this Period 9.62	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation APP DEVELOPMENT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.88	

Full Name (Last, First, Middle Initial) B. Dale Hovey		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 6 Westborough Drive		Transaction ID: 20071112-1194-23-3	
City State Zip Code Weatogue CT 06089-9786		Amount of Each Receipt this Period 9.62	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation APP DEVELOPMENT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.88	

Full Name (Last, First, Middle Initial) C. Dale Hovey		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 6 Westborough Drive		Transaction ID: 20071126-1194-23-3	
City State Zip Code Weatogue CT 06089-9786		Amount of Each Receipt this Period 9.62	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation APP DEVELOPMENT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.88	

SUBTOTAL of Receipts This Page (optional) ▶	28.86
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Scott C Hudson		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 108 Jonathan Court		Transaction ID: 20071029-4297-23-3	
City State Zip Code Franklin TN 37069-8702	Amount of Each Receipt this Period 10.40		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation BUSINESS PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.47		

Full Name (Last, First, Middle Initial) B. Scott C Hudson		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 108 Jonathan Court		Transaction ID: 20071112-4284-23-3	
City State Zip Code Franklin TN 37069-8702	Amount of Each Receipt this Period 10.40		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation BUSINESS PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.47		

Full Name (Last, First, Middle Initial) C. Scott C Hudson		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 108 Jonathan Court		Transaction ID: 20071126-4281-23-3	
City State Zip Code Franklin TN 37069-8702	Amount of Each Receipt this Period 10.40		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation BUSINESS PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.47		

SUBTOTAL of Receipts This Page (optional) ▶	31.20
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert J Hughes		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 120 Shandon Place		Transaction ID: 20071029-1719-23-3	
City Malvern	State PA	Zip Code 19355-3177	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP BFO INTERNATIONAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) B. Robert J Hughes		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 120 Shandon Place		Transaction ID: 20071112-1715-23-3	
City Malvern	State PA	Zip Code 19355-3177	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP BFO INTERNATIONAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) C. Robert J Hughes		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 120 Shandon Place		Transaction ID: 20071126-1715-23-3	
City Malvern	State PA	Zip Code 19355-3177	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP BFO INTERNATIONAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Md M Iftekhar		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 210 Cabot Court		Transaction ID: 20071029-2720-23-3	
City State Zip Code Deptford NJ 08096-5114	Amount of Each Receipt this Period 10.20		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation APP DEVELOPMENT SR SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.38		

Full Name (Last, First, Middle Initial) B. Md M Iftekhar		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 210 Cabot Court		Transaction ID: 20071112-2712-23-3	
City State Zip Code Deptford NJ 08096-5114	Amount of Each Receipt this Period 10.20		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation APP DEVELOPMENT SR SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.38		

Full Name (Last, First, Middle Initial) C. Md M Iftekhar		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 210 Cabot Court		Transaction ID: 20071126-2712-23-3	
City State Zip Code Deptford NJ 08096-5114	Amount of Each Receipt this Period 10.20		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation APP DEVELOPMENT SR SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.38		

SUBTOTAL of Receipts This Page (optional) ▶	30.60
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Abdul-Alim Issa		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 5 Corvette Court		Transaction ID: 20071029-153-23-3	
City State Zip Code New Castle DE 19720-8713		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation UNDERWRITING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Abdul-Alim Issa		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 5 Corvette Court		Transaction ID: 20071112-153-23-3	
City State Zip Code New Castle DE 19720-8713		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation UNDERWRITING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Abdul-Alim Issa		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 5 Corvette Court		Transaction ID: 20071126-153-23-3	
City State Zip Code New Castle DE 19720-8713		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation UNDERWRITING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 83 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeryllyn Jacobs

Mailing Address 136 Avondale Avenue

City State Zip Code
Haddonfield NJ 08033-2636

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE OPERATIONS DIRECTOR
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 598.83

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-2752-23-3

Amount of Each Receipt this Period
14.48

B. Full Name (Last, First, Middle Initial)
Jeryllyn Jacobs

Mailing Address 136 Avondale Avenue

City State Zip Code
Haddonfield NJ 08033-2636

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE OPERATIONS DIRECTOR
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 598.83

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-2744-23-3

Amount of Each Receipt this Period
14.48

C. Full Name (Last, First, Middle Initial)
Jeryllyn Jacobs

Mailing Address 136 Avondale Avenue

City State Zip Code
Haddonfield NJ 08033-2636

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE OPERATIONS DIRECTOR
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 598.83

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-2744-23-3

Amount of Each Receipt this Period
14.48

SUBTOTAL of Receipts This Page (optional)	▶	43.44
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. William S Jameson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 690 Bradford Street		Transaction ID: 20071029-9077-23-3
City State Zip Code Pasadena CA 91105-2411	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ASSOC CHIEF COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. William S Jameson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 690 Bradford Street		Transaction ID: 20071112-9055-23-3
City State Zip Code Pasadena CA 91105-2411	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ASSOC CHIEF COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. William S Jameson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 690 Bradford Street		Transaction ID: 20071126-9042-23-3
City State Zip Code Pasadena CA 91105-2411	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ASSOC CHIEF COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. James M Jeffers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 50 Paley Farms Road		Transaction ID: 20071029-360-23-3
City State Zip Code Portland CT 06480-1021	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INFORMATION PROTECTION DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. James M Jeffers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 50 Paley Farms Road		Transaction ID: 20071112-359-23-3
City State Zip Code Portland CT 06480-1021	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INFORMATION PROTECTION DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. James M Jeffers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 50 Paley Farms Road		Transaction ID: 20071126-359-23-3
City State Zip Code Portland CT 06480-1021	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INFORMATION PROTECTION DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Eileen M Jonas-Ryan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 1469 Greenleaf Dr. N		Transaction ID: 20071029-3495-23-3
City State Zip Code Warrington PA 18976-1337	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS SR SPEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Eileen M Jonas-Ryan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 1469 Greenleaf Dr. N		Transaction ID: 20071112-3484-23-3
City State Zip Code Warrington PA 18976-1337	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS SR SPEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Eileen M Jonas-Ryan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 1469 Greenleaf Dr. N		Transaction ID: 20071126-3482-23-3
City State Zip Code Warrington PA 18976-1337	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS SR SPEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Frank E Jones		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 2622 Cedarvue Drive		Transaction ID: 20071029-4103-23-3
City State Zip Code Pittsburgh PA 15241-2912	Amount of Each Receipt this Period 16.28	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 388.52	

Full Name (Last, First, Middle Initial) B. Frank E Jones		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 2622 Cedarvue Drive		Transaction ID: 20071112-4090-23-3
City State Zip Code Pittsburgh PA 15241-2912	Amount of Each Receipt this Period 16.28	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 388.52	

Full Name (Last, First, Middle Initial) C. Frank E Jones		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 2622 Cedarvue Drive		Transaction ID: 20071126-4087-23-3
City State Zip Code Pittsburgh PA 15241-2912	Amount of Each Receipt this Period 16.28	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 388.52	

SUBTOTAL of Receipts This Page (optional) ▶	48.84
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Gail R Jones		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 31 Rillbank Terrace		Transaction ID: 20071029-8849-23-3	
City West Hartford	State CT	Zip Code 06107-1032	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Gail R Jones		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 31 Rillbank Terrace		Transaction ID: 20071112-8827-23-3	
City West Hartford	State CT	Zip Code 06107-1032	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Gail R Jones		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 31 Rillbank Terrace		Transaction ID: 20071126-8815-23-3	
City West Hartford	State CT	Zip Code 06107-1032	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Scott Josephs		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 403 Tramore Drive		Transaction ID: 20071029-9854-23-3
City State Zip Code Chapel Hill NC 27516-4642	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Scott Josephs		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 403 Tramore Drive		Transaction ID: 20071112-9829-23-3
City State Zip Code Chapel Hill NC 27516-4642	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Scott Josephs		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 403 Tramore Drive		Transaction ID: 20071126-9816-23-3
City State Zip Code Chapel Hill NC 27516-4642	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Kristin P Julason		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2939 Van Ness Street Northwest Apt		Transaction ID: 20071029-3259-23-3	
City State Zip Code Washington DC 20008-4629	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation GOVERNMENT AFFAIRS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) B. Kristin P Julason		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2939 Van Ness Street Northwest Apt		Transaction ID: 20071112-3248-23-3	
City State Zip Code Washington DC 20008-4629	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation GOVERNMENT AFFAIRS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Kristin P Julason		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2939 Van Ness Street Northwest Apt		Transaction ID: 20071126-3247-23-3	
City State Zip Code Washington DC 20008-4629	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation GOVERNMENT AFFAIRS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Eric E Kaufuss Mailing Address 8525 Hale Road City Hixson State TN Zip Code 37343-1431 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071029-4199-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	0	7	10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	1	/	2	0	0	7														
10.00																							
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: STAFFING MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>240.00</td> </tr> </table>		240.00																					
240.00																							

B. Full Name (Last, First, Middle Initial) Eric E Kaufuss Mailing Address 8525 Hale Road City Hixson State TN Zip Code 37343-1431 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071112-4185-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	5	/	2	0	0	7	10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	5	/	2	0	0	7														
10.00																							
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: STAFFING MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>240.00</td> </tr> </table>		240.00																					
240.00																							

C. Full Name (Last, First, Middle Initial) Eric E Kaufuss Mailing Address 8525 Hale Road City Hixson State TN Zip Code 37343-1431 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071126-4182-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	9	/	2	0	0	7	10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	2	9	/	2	0	0	7														
10.00																							
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: STAFFING MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>240.00</td> </tr> </table>		240.00																					
240.00																							

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Coretta H Key

Mailing Address 11199 Stonebrook Drive

City State Zip Code
Manassas VA 20112-3053

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE QUALITY MANAGER
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-4837-23-3

Amount of Each Receipt this Period
10.27

B. Full Name (Last, First, Middle Initial)
Coretta H Key

Mailing Address 11199 Stonebrook Drive

City State Zip Code
Manassas VA 20112-3053

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE QUALITY MANAGER
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-4820-23-3

Amount of Each Receipt this Period
10.27

C. Full Name (Last, First, Middle Initial)
Coretta H Key

Mailing Address 11199 Stonebrook Drive

City State Zip Code
Manassas VA 20112-3053

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE QUALITY MANAGER
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-4817-23-3

Amount of Each Receipt this Period
10.27

SUBTOTAL of Receipts This Page (optional)	▶	30.81
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 93 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Denise Kramer		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 617 Stockton Circle		Transaction ID: 20071126-3809-23-3	
City Ridley Park	State PA	Zip Code 19078-1306	Amount of Each Receipt this Period 7.44
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation ACCOUNT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.60		

Full Name (Last, First, Middle Initial) B. Diana L Kycia		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 98 Garfield Road		Transaction ID: 20071029-1177-23-3	
City West Hartford	State CT	Zip Code 06107-2910	Amount of Each Receipt this Period 11.90
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.92		

Full Name (Last, First, Middle Initial) C. Diana L Kycia		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 98 Garfield Road		Transaction ID: 20071112-1176-23-3	
City West Hartford	State CT	Zip Code 06107-2910	Amount of Each Receipt this Period 11.90
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.92		

SUBTOTAL of Receipts This Page (optional) ▶	31.24
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 94 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Diana L Kycia		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 98 Garfield Road		Transaction ID: 20071126-1175-23-3	
City West Hartford	State CT	Zip Code 06107-2910	Amount of Each Receipt this Period 11.90
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.92		

Full Name (Last, First, Middle Initial) B. Maria Y Kyriakos		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 23 Harwich Lane		Transaction ID: 20071029-8871-23-3	
City West Hartford	State CT	Zip Code 06117-1437	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation HR SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Maria Y Kyriakos		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 23 Harwich Lane		Transaction ID: 20071112-8849-23-3	
City West Hartford	State CT	Zip Code 06117-1437	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation HR SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	31.90
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Maria Y Kyriakos		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 23 Harwich Lane		Transaction ID: 20071126-8836-23-3	
City State Zip Code West Hartford CT 06117-1437		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation HR SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Rene R LaFleur		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 169 Burnham Road		Transaction ID: 20071029-252-23-3	
City State Zip Code Lowell MA 01852-1611		Amount of Each Receipt this Period 6.62	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.79	

Full Name (Last, First, Middle Initial) C. Rene R LaFleur		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 169 Burnham Road		Transaction ID: 20071112-251-23-3	
City State Zip Code Lowell MA 01852-1611		Amount of Each Receipt this Period 6.62	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.79	

SUBTOTAL of Receipts This Page (optional) ▶	23.24
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Rene R LaFleur		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 169 Burnham Road		Transaction ID: 20071126-251-23-3	
City State Zip Code Lowell MA 01852-1611	Amount of Each Receipt this Period 6.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.79		

Full Name (Last, First, Middle Initial) B. Kenneth P Langevin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 32 Castlewood Road		Transaction ID: 20071029-1700-23-3	
City State Zip Code West Hartford CT 06107-2903	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Kenneth P Langevin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 32 Castlewood Road		Transaction ID: 20071112-1696-23-3	
City State Zip Code West Hartford CT 06107-2903	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional) ▶	36.62
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 97 / 195						
	(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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Kenneth P Langevin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 32 Castlewood Road		Transaction ID: 20071126-1696-23-3	
City West Hartford	State CT	Zip Code 06107-2903	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) B. R. A Lara		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 3987 E Herrera Drive		Transaction ID: 20071029-3712-23-3	
City Phoenix	State AZ	Zip Code 85050-5461	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SALES MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. R. A Lara		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 3987 E Herrera Drive		Transaction ID: 20071112-3700-23-3	
City Phoenix	State AZ	Zip Code 85050-5461	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SALES MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	35.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. R. A Lara		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 3987 E Herrera Drive		Transaction ID: 20071126-3697-23-3	
City State Zip Code Phoenix AZ 85050-5461	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SALES MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Alfredo Lathrop		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 11 Alexandra Court		Transaction ID: 20071029-5344-23-3	
City State Zip Code Glen Mills PA 19342-1782	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP HUMAN RESOURCES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Alfredo Lathrop		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 11 Alexandra Court		Transaction ID: 20071112-5327-23-3	
City State Zip Code Glen Mills PA 19342-1782	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP HUMAN RESOURCES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Alfredo Lathrop		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 11 Alexandra Court		Transaction ID: 20071126-5320-23-3
City Glen Mills	State PA	Zip Code 19342-1782
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP HUMAN RESOURCES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. William P Lawless		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address 509 S Bay Shore Boulevard		Transaction ID: 20071029-2457-23-3
City Gilbert	State AZ	Zip Code 85233-6624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. William P Lawless		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 509 S Bay Shore Boulevard		Transaction ID: 20071112-2451-23-3
City Gilbert	State AZ	Zip Code 85233-6624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
William P Lawless

Mailing Address 509 S Bay Shore Boulevard

City State Zip Code
Gilbert AZ 85233-6624

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

Name of Employer Occupation
CIGNA HEALTHCARE OF AZ, INC ADULT MEDICINE PRACTITIONER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-2451-23-3

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Lisa F Lawrence

Mailing Address 15602 Eastbourn Drive

City State Zip Code
Odessa FL 33556-2850

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO OPERATIONS MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 306.91

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-4425-23-3

Amount of Each Receipt this Period
12.95

C. Full Name (Last, First, Middle Initial)
Lisa F Lawrence

Mailing Address 15602 Eastbourn Drive

City State Zip Code
Odessa FL 33556-2850

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO OPERATIONS MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 306.91

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-4411-23-3

Amount of Each Receipt this Period
13.09

SUBTOTAL of Receipts This Page (optional)	46.04
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Lisa F Lawrence		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 15602 Eastbourn Drive		Transaction ID: 20071126-4408-23-3	
City State Zip Code Odessa FL 33556-2850	Amount of Each Receipt this Period 13.22		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.91		

Full Name (Last, First, Middle Initial) B. Charles Levine		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 6469 Northeast 186th Street		Transaction ID: 20071029-3689-23-3	
City State Zip Code Kenmore WA 98028-7934	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

Full Name (Last, First, Middle Initial) C. Charles Levine		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 6469 Northeast 186th Street		Transaction ID: 20071112-3678-23-3	
City State Zip Code Kenmore WA 98028-7934	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

SUBTOTAL of Receipts This Page (optional) ▶	32.46
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Charles Levine		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 6469 Northeast 186th Street		Transaction ID: 20071126-3675-23-3	
City State Zip Code Kenmore WA 98028-7934	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

Full Name (Last, First, Middle Initial) B. David Long		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 6017 E Powder House Circle		Transaction ID: 20071029-11755-23-3	
City State Zip Code Sioux Falls SD 57110-7468	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer TEL-DRUG, INC.	Occupation OPERATIONS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. David Long		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 6017 E Powder House Circle		Transaction ID: 20071112-11721-23-3	
City State Zip Code Sioux Falls SD 57110-7468	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer TEL-DRUG, INC.	Occupation OPERATIONS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	29.62
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. David Long		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 6017 E Powder House Circle		Transaction ID: 20071126-11701-23-3	
City State Zip Code Sioux Falls SD 57110-7468	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer TEL-DRUG, INC.	Occupation OPERATIONS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Christophe R Loomis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 909 Overton Avenue		Transaction ID: 20071029-6167-23-3	
City State Zip Code Yardley PA 19067-1025	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) C. Christophe R Loomis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 909 Overton Avenue		Transaction ID: 20071112-6154-23-3	
City State Zip Code Yardley PA 19067-1025	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional) ▶	50.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Christophe R Loomis		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 909 Overton Avenue		Transaction ID: 20071126-6146-23-3	
City State Zip Code Yardley PA 19067-1025	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation ASSOC CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) B. Jon E Maesner		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 22 Crosswood Road		Transaction ID: 20071029-8857-23-3	
City State Zip Code Farmington CT 06032-1043	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Jon E Maesner		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 22 Crosswood Road		Transaction ID: 20071112-8835-23-3	
City State Zip Code Farmington CT 06032-1043	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional) ▶	50.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jon E Maesner		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 22 Crosswood Road		Transaction ID: 20071126-8823-23-3	
City State Zip Code Farmington CT 06032-1043	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) B. William J Maher		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 10 John Singer Sargent Way		Transaction ID: 20071029-4367-23-3	
City State Zip Code Marlton NJ 08053-7215	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. William J Maher		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 10 John Singer Sargent Way		Transaction ID: 20071112-4354-23-3	
City State Zip Code Marlton NJ 08053-7215	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	35.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. William J Maher		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 10 John Singer Sargent Way		Transaction ID: 20071126-4351-23-3	
City State Zip Code Marlton NJ 08053-7215	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Carla C Mangiafico		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 47 Kelsey Lane		Transaction ID: 20071029-334-23-3	
City State Zip Code Glastonbury CT 06033-5040	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNTING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Carla C Mangiafico		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 47 Kelsey Lane		Transaction ID: 20071112-333-23-3	
City State Zip Code Glastonbury CT 06033-5040	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNTING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional) ▶	40.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Carla C Mangiafico		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 47 Kelsey Lane		Transaction ID: 20071126-333-23-3	
City Glastonbury	State CT	Amount of Each Receipt this Period 15.00	
Zip Code 06033-5040			
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNTING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) B. John W Matheny		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 43 S Taylor Point Drive		Transaction ID: 20071029-5709-23-3	
City the Woodlands	State TX	Amount of Each Receipt this Period 16.78	
Zip Code 77382-1243			
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 397.63		

Full Name (Last, First, Middle Initial) C. John W Matheny		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 43 S Taylor Point Drive		Transaction ID: 20071112-5693-23-3	
City the Woodlands	State TX	Amount of Each Receipt this Period 16.78	
Zip Code 77382-1243			
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 397.63		

SUBTOTAL of Receipts This Page (optional) ▶	48.56
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
John W Matheny

Mailing Address 43 S Taylor Point Drive

City State Zip Code
the Woodlands TX 77382-1243

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE PROVIDER CONTRACTING DIRECTOR
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 397.63

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-5685-23-3

Amount of Each Receipt this Period
16.78

B. Full Name (Last, First, Middle Initial)
Susan G McClure

Mailing Address 221 Birchwood Drive

City State Zip Code
West Chester PA 19380-7317

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AM- HR DIRECTOR
ERICA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-11959-23-3

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Susan G McClure

Mailing Address 221 Birchwood Drive

City State Zip Code
West Chester PA 19380-7317

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AM- HR DIRECTOR
ERICA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-11925-23-3

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)	▶	36.78
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Susan G McClure		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 221 Birchwood Drive		Transaction ID: 20071126-11904-23-3	
City State Zip Code West Chester PA 19380-7317		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation HR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Wanda M McConico		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 12230 Sherman Drive		Transaction ID: 20071029-4613-23-3	
City State Zip Code Charlotte NC 28273-3856		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Wanda M McConico		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 12230 Sherman Drive		Transaction ID: 20071112-4599-23-3	
City State Zip Code Charlotte NC 28273-3856		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Wanda M McConico		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 12230 Sherman Drive		Transaction ID: 20071126-4597-23-3
City State Zip Code Charlotte NC 28273-3856	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. William McGean		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address 10 Grosvenor Road		Transaction ID: 20071029-11509-23-3
City State Zip Code Waltham MA 02453-6821	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation CORPORATE REAL ESTATE MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. William McGean		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 10 Grosvenor Road		Transaction ID: 20071112-11476-23-3
City State Zip Code Waltham MA 02453-6821	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation CORPORATE REAL ESTATE MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	▶	40.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. William McGean		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 10 Grosvenor Road		Transaction ID: 20071126-11456-23-3	
City Waltham	State MA	Zip Code 02453-6821	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation CORPORATE REAL ESTATE MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) B. Sheila McGinley-Graziosi		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 32 Starview Drive		Transaction ID: 20071029-1781-23-3	
City Glastonbury	State CT	Zip Code 06033-2818	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKETING PRODUCT SR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Sheila McGinley-Graziosi		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 32 Starview Drive		Transaction ID: 20071112-1777-23-3	
City Glastonbury	State CT	Zip Code 06033-2818	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKETING PRODUCT SR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	35.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Sheila McGinley-Graziosi		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 32 Starview Drive		Transaction ID: 20071126-1777-23-3	
City Glastonbury	State CT	Amount of Each Receipt this Period 10.00	
Zip Code 06033-2818		Transaction ID: 20071126-1777-23-3	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKETING PRODUCT SR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Brian C McNeil		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 1359 Shady Knoll Court		Transaction ID: 20071029-6393-23-3	
City Longwood	State FL	Amount of Each Receipt this Period 10.00	
Zip Code 32750-7152		Transaction ID: 20071029-6393-23-3	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Brian C McNeil		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 1359 Shady Knoll Court		Transaction ID: 20071112-6378-23-3	
City Longwood	State FL	Amount of Each Receipt this Period 10.00	
Zip Code 32750-7152		Transaction ID: 20071112-6378-23-3	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	30.00
TOTAL This Period (last page this line number only) ▶	30.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 113 / 195						
	(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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Brian C McNeil		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 1359 Shady Knoll Court		Transaction ID: 20071126-6369-23-3	
City State Zip Code Longwood FL 32750-7152	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Mark J McPhail		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 4607 Mill Wood Drive		Transaction ID: 20071029-7514-23-3	
City State Zip Code Colleyville TX 76034-3693	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Mark J McPhail		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 4607 Mill Wood Drive		Transaction ID: 20071112-7498-23-3	
City State Zip Code Colleyville TX 76034-3693	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mark J McPhail

Mailing Address 4607 Mill Wood Drive

City State Zip Code
Colleyville TX 76034-3693

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE SENIOR ACCOUNT MANAGER
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-7486-23-3

Amount of Each Receipt this Period
10.00

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

Mailing Address 20 Lexington Manor

City State Zip Code
Glenmoore PA 19343-1900

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

Name of Employer Occupation
CIGNA CORPORATION COMPLIANCE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-2251-23-3

Amount of Each Receipt this Period
12.00

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

Mailing Address 20 Lexington Manor

City State Zip Code
Glenmoore PA 19343-1900

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

Name of Employer Occupation
CIGNA CORPORATION COMPLIANCE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-2246-23-3

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional)	▶	34.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Steven G Mellas		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 20 Lexington Manor		Transaction ID: 20071126-2246-23-3	
City State Zip Code Glenmoore PA 19343-1900	Amount of Each Receipt this Period 12.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation COMPLIANCE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00		

Full Name (Last, First, Middle Initial) B. Christophe L Miller		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2530 Allegheny Drive		Transaction ID: 20071029-7247-23-3	
City State Zip Code Chattanooga TN 37421-2032	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CONTRACT SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Christophe L Miller		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2530 Allegheny Drive		Transaction ID: 20071112-7233-23-3	
City State Zip Code Chattanooga TN 37421-2032	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CONTRACT SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	32.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Christophe L Miller		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2530 Allegheny Drive		Transaction ID: 20071126-7221-23-3	
City State Zip Code Chattanooga TN 37421-2032	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CONTRACT SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Ronald E Miller		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2683 Churchill Downs Circle		Transaction ID: 20071029-6966-23-3	
City State Zip Code Chattanooga TN 37421-1488	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CLAIMS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Ronald E Miller		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2683 Churchill Downs Circle		Transaction ID: 20071112-6951-23-3	
City State Zip Code Chattanooga TN 37421-1488	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CLAIMS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Ronald E Miller		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2683 Churchill Downs Circle		Transaction ID: 20071126-6942-23-3	
City State Zip Code Chattanooga TN 37421-1488	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CLAIMS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Morris D Mirabella		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 5820 Aventura Court		Transaction ID: 20071029-9526-23-3	
City State Zip Code Tampa FL 33625-4111	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SALES MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Morris D Mirabella		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 5820 Aventura Court		Transaction ID: 20071112-9503-23-3	
City State Zip Code Tampa FL 33625-4111	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SALES MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional) ▶	40.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Morris D Mirabella		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 5820 Aventura Court		Transaction ID: 20071126-9490-23-3
City State Zip Code Tampa FL 33625-4111	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SALES MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Kymberly P Miranda		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 5633 Northwest 88th Terrace		Transaction ID: 20071029-6220-23-3
City State Zip Code Coral Springs FL 33067-2862	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. Kymberly P Miranda		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 5633 Northwest 88th Terrace		Transaction ID: 20071112-6206-23-3
City State Zip Code Coral Springs FL 33067-2862	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional) ▶	55.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Kymberly P Miranda		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 5633 Northwest 88th Terrace		Transaction ID: 20071126-6198-23-3	
City State Zip Code Coral Springs FL 33067-2862	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) B. Jodie K Mirfendereski		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 104 Glenlivet Place		Transaction ID: 20071029-5297-23-3	
City State Zip Code Powell OH 43065-9699	Amount of Each Receipt this Period 10.10		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.53		

Full Name (Last, First, Middle Initial) C. Jodie K Mirfendereski		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 104 Glenlivet Place		Transaction ID: 20071112-5281-23-3	
City State Zip Code Powell OH 43065-9699	Amount of Each Receipt this Period 10.10		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.53		

SUBTOTAL of Receipts This Page (optional) ▶	40.20
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jodie K Mirfendereski		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 104 Glenlivet Place		Transaction ID: 20071126-5274-23-3
City State Zip Code Powell OH 43065-9699	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.10
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROJECT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.53	

Full Name (Last, First, Middle Initial) B. Melanie N Monchick		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address 103 Loch Haven Lane		Transaction ID: 20071029-9126-23-3
City State Zip Code Cary NC 27511-8409	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Melanie N Monchick		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 103 Loch Haven Lane		Transaction ID: 20071112-9104-23-3
City State Zip Code Cary NC 27511-8409	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	30.10
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Melanie N Monchick

Mailing Address 103 Loch Haven Lane

City State Zip Code
Cary NC 27511-8409

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

Name of Employer
INT'L REHAB. ASSOCIATES, INC.

Occupation
OPERATIONS DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-9091-23-3

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Kenneth W Munkel

Mailing Address 11835 Wildwood Springs Drive

City State Zip Code
Roswell GA 30075-1842

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SENIOR ACCOUNT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-2887-23-3

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Kenneth W Munkel

Mailing Address 11835 Wildwood Springs Drive

City State Zip Code
Roswell GA 30075-1842

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SENIOR ACCOUNT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-2879-23-3

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Kenneth W Munkel		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 11835 Wildwood Springs Drive		Transaction ID: 20071126-2878-23-3	
City State Zip Code Roswell GA 30075-1842		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. John M Murabito		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 105 Mill View Lane		Transaction ID: 20071029-14921-23-3	
City State Zip Code Newtown Square PA 19073-1428		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION		Occupation EVP HUMAN RESOURCES & SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.00	

Full Name (Last, First, Middle Initial) C. John M Murabito		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 105 Mill View Lane		Transaction ID: 20071112-14868-23-3	
City State Zip Code Newtown Square PA 19073-1428		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION		Occupation EVP HUMAN RESOURCES & SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional) ▶	210.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 123 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. John M Murabito		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 105 Mill View Lane		Transaction ID: 20071126-14839-23-3	
City State Zip Code Newtown Square PA 19073-1428	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation EVP HUMAN RESOURCES & SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00		

Full Name (Last, First, Middle Initial) B. James L Nadler		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 143 N Shawnee Ridge Circle		Transaction ID: 20071029-6150-23-3	
City State Zip Code Spring TX 77382-2557	Amount of Each Receipt this Period 11.22		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.14		

Full Name (Last, First, Middle Initial) C. James L Nadler		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 143 N Shawnee Ridge Circle		Transaction ID: 20071112-6137-23-3	
City State Zip Code Spring TX 77382-2557	Amount of Each Receipt this Period 11.22		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.14		

SUBTOTAL of Receipts This Page (optional) ▶	122.44
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. James L Nadler		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 143 N Shawnee Ridge Circle		Transaction ID: 20071126-6129-23-3
City State Zip Code Spring TX 77382-2557	Amount of Each Receipt this Period 11.22	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.14	

Full Name (Last, First, Middle Initial) B. Noreen Nageotte		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 28205 W Oviatt Road		Transaction ID: 20071029-10190-23-3
City State Zip Code Bay Village OH 44140-2110	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Noreen Nageotte		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 28205 W Oviatt Road		Transaction ID: 20071112-10159-23-3
City State Zip Code Bay Village OH 44140-2110	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	31.22
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 125 / 195						
	(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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Noreen Nageotte		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 28205 W Oviatt Road		Transaction ID: 20071126-10144-23-3	
City State Zip Code Bay Village OH 44140-2110	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Van A Nelmark		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2120 Southwest 52nd Avenue		Transaction ID: 20071029-5120-23-3	
City State Zip Code Plantation FL 33317-6050	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA DENTAL HEALTH OF FL, INC	Occupation DENTIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Van A Nelmark		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 2120 Southwest 52nd Avenue		Transaction ID: 20071112-5104-23-3	
City State Zip Code Plantation FL 33317-6050	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA DENTAL HEALTH OF FL, INC	Occupation DENTIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Van A Nelmark		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 2120 Southwest 52nd Avenue		Transaction ID: 20071126-5099-23-3	
City State Zip Code Plantation FL 33317-6050		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA DENTAL HEALTH OF FL, INC		Occupation DENTIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Daniel Nicoll		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 4 Bayview Drive		Transaction ID: 20071029-2608-23-3	
City State Zip Code Plainview NY 11803-1534		Amount of Each Receipt this Period 25.93	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 619.17	

Full Name (Last, First, Middle Initial) C. Daniel Nicoll		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 4 Bayview Drive		Transaction ID: 20071112-2601-23-3	
City State Zip Code Plainview NY 11803-1534		Amount of Each Receipt this Period 25.93	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 619.17	

SUBTOTAL of Receipts This Page (optional) ▶	61.86
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 127 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Daniel Nicoll Mailing Address 4 Bayview Drive City State Zip Code Plainview NY 11803-1534 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071126-2600-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.93</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	9	/	2	0	0	7	25.93
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	2	9	/	2	0	0	7														
25.93																							
Name of Employer Occupation CT GENERAL LIFE INSURANCE CO MEDICAL SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>619.17</td> </tr> </table>		619.17																					
619.17																							

B. Full Name (Last, First, Middle Initial) Jeffery L Novak Mailing Address 34 Sherman Drive City State Zip Code Malvern PA 19355-3185 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071029-11735-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>85.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	0	7	85.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	1	/	2	0	0	7														
85.00																							
Name of Employer Occupation CIGNA CORPORATION VP CORPORATE SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>2040.00</td> </tr> </table>		2040.00																					
2040.00																							

C. Full Name (Last, First, Middle Initial) Jeffery L Novak Mailing Address 34 Sherman Drive City State Zip Code Malvern PA 19355-3185 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071112-11701-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>85.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	5	/	2	0	0	7	85.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	5	/	2	0	0	7														
85.00																							
Name of Employer Occupation CIGNA CORPORATION VP CORPORATE SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>2040.00</td> </tr> </table>		2040.00																					
2040.00																							

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td>195.93</td> </tr> </table>	195.93
195.93		
TOTAL 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jeffery L Novak		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 34 Sherman Drive		Transaction ID: 20071126-11681-23-3
City Malvern State PA Zip Code 19355-3185	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 85.00
Name of Employer CIGNA CORPORATION Occupation VP CORPORATE SERVICES	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00

Full Name (Last, First, Middle Initial) B. Eliana Nunez		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address 120 Ridge Crest Circle		Transaction ID: 20071029-1512-23-3
City Wethersfield State CT Zip Code 06109-4618	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 14.63
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation PROJECT MANAGEMENT DIRECTOR	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.29

Full Name (Last, First, Middle Initial) C. Eliana Nunez		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 120 Ridge Crest Circle		Transaction ID: 20071112-1512-23-3
City Wethersfield State CT Zip Code 06109-4618	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 14.63
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation PROJECT MANAGEMENT DIRECTOR	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.29

SUBTOTAL of Receipts This Page (optional)	114.26
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Eliana Nunez		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 120 Ridge Crest Circle		Transaction ID: 20071126-1513-23-3
City State Zip Code Wethersfield CT 06109-4618	Amount of Each Receipt this Period 14.63	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROJECT MANAGEMENT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.29	

Full Name (Last, First, Middle Initial) B. Janice R Ogle		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 1449 S Granite Avenue		Transaction ID: 20071029-9299-23-3
City State Zip Code Ontario CA 91762-5540	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF CA, INC.	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Janice R Ogle		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 1449 S Granite Avenue		Transaction ID: 20071112-9277-23-3
City State Zip Code Ontario CA 91762-5540	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF CA, INC.	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	34.63
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Janice R Ogle

Mailing Address 1449 S Granite Avenue

City State Zip Code
Ontario CA 91762-5540

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

Name of Employer
CIGNA HEALTHCARE OF CA, INC.

Occupation
OPERATIONS DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-9263-23-3

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Katherine Overbye

Mailing Address 995 Hopmeadow Street

City State Zip Code
Simsbury CT 06070-1812

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
UNDERWRITING SENIOR DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-1761-23-3

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Katherine Overbye

Mailing Address 995 Hopmeadow Street

City State Zip Code
Simsbury CT 06070-1812

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
UNDERWRITING SENIOR DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-1757-23-3

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Katherine Overbye		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 995 Hopmeadow Street		Transaction ID: 20071126-1757-23-3	
City State Zip Code Simsbury CT 06070-1812	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation UNDERWRITING SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Charlene Parsons		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 1179 Colts Lane		Transaction ID: 20071029-15527-23-3	
City State Zip Code Yardley PA 19067-3964	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP TOTAL REWARDS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00		

Full Name (Last, First, Middle Initial) C. Charlene Parsons		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 1179 Colts Lane		Transaction ID: 20071112-15470-23-3	
City State Zip Code Yardley PA 19067-3964	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP TOTAL REWARDS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00		

SUBTOTAL of Receipts This Page (optional) ▶	180.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 132 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Charlene Parsons		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 1179 Colts Lane		Transaction ID: 20071126-15440-23-3	
City State Zip Code Yardley PA 19067-3964	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP TOTAL REWARDS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00		

Full Name (Last, First, Middle Initial) B. Mark A Parsons		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 15 Rexinger Lane		Transaction ID: 20071029-591-23-3	
City State Zip Code Avon CT 06001-2340	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SVP REINSURANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) C. Mark A Parsons		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 15 Rexinger Lane		Transaction ID: 20071112-590-23-3	
City State Zip Code Avon CT 06001-2340	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SVP REINSURANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional) ▶	125.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Mark A Parsons		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 15 Rexinger Lane		Transaction ID: 20071126-590-23-3	
City Avon	State CT	Zip Code 06001-2340	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SVP REINSURANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) B. Terry L Perkins		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 712 N 2nd Street		Transaction ID: 20071126-8629-23-3	
City Avondale	State AZ	Zip Code 85323-1610	Amount of Each Receipt this Period 8.45
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation PHYSICIAN ASSISTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.17		

Full Name (Last, First, Middle Initial) C. John R Perlstein		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 19 Clover Lane		Transaction ID: 20071029-2145-23-3	
City Manchester	State CT	Zip Code 06040-6771	Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00		

SUBTOTAL of Receipts This Page (optional) ▶	113.45
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 134 / 195
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. John R Perlstein		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 19 Clover Lane		Transaction ID: 20071112-2140-23-3	
City Manchester	State CT	Zip Code 06040-6771	Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00		

Full Name (Last, First, Middle Initial) B. John R Perlstein		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 19 Clover Lane		Transaction ID: 20071126-2140-23-3	
City Manchester	State CT	Zip Code 06040-6771	Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP CHIEF COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00		

Full Name (Last, First, Middle Initial) C. Raymond H Perry		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 112 W Walnut Avenue		Transaction ID: 20071029-2815-23-3	
City Moorestown	State NJ	Zip Code 08057-1808	Amount of Each Receipt this Period 10.67
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation BUDGET MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.98		

SUBTOTAL of Receipts This Page (optional) ▶	180.67
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Raymond H Perry		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 112 W Walnut Avenue		Transaction ID: 20071112-2807-23-3	
City State Zip Code Moorestown NJ 08057-1808	Amount of Each Receipt this Period 10.67		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation BUDGET MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.98		

Full Name (Last, First, Middle Initial) B. Raymond H Perry		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 112 W Walnut Avenue		Transaction ID: 20071126-2807-23-3	
City State Zip Code Moorestown NJ 08057-1808	Amount of Each Receipt this Period 10.67		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation BUDGET MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.98		

Full Name (Last, First, Middle Initial) C. Robert D Picinich		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 1096 Maple Hill Lane		Transaction ID: 20071029-2751-23-3	
City State Zip Code Malvern PA 19355-2340	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	31.34
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert D Picinich		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 1096 Maple Hill Lane		Transaction ID: 20071112-2743-23-3
City State Zip Code Malvern PA 19355-2340	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Robert D Picinich		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 1096 Maple Hill Lane		Transaction ID: 20071126-2743-23-3
City State Zip Code Malvern PA 19355-2340	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Clifford C Podewell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 19814 N Desert Song Court		Transaction ID: 20071029-5843-23-3
City State Zip Code Surprise AZ 85374-2034	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Clifford C Podewell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 19814 N Desert Song Court		Transaction ID: 20071112-5828-23-3	
City State Zip Code Surprise AZ 85374-2034	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Clifford C Podewell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 19814 N Desert Song Court		Transaction ID: 20071126-5820-23-3	
City State Zip Code Surprise AZ 85374-2034	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Glenn D Pomerantz		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 140 Hyde Road		Transaction ID: 20071029-11821-23-3	
City State Zip Code West Hartford CT 06117-1620	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional) ▶	40.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Glenn D Pomerantz		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 140 Hyde Road		Transaction ID: 20071112-11787-23-3
City State Zip Code West Hartford CT 06117-1620		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) B. Glenn D Pomerantz		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 140 Hyde Road		Transaction ID: 20071126-11767-23-3
City State Zip Code West Hartford CT 06117-1620		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. David M Porcello		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 24 Magnolia Drive		Transaction ID: 20071029-1637-23-3
City State Zip Code Suffield CT 06078-1549		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION	Occupation VP TAX	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	50.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. David M Porcello		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 24 Magnolia Drive		Transaction ID: 20071112-1634-23-3	
City State Zip Code Suffield CT 06078-1549	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP TAX		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. David M Porcello		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 24 Magnolia Drive		Transaction ID: 20071126-1635-23-3	
City State Zip Code Suffield CT 06078-1549	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation VP TAX		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Michele A Powers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 337 Magnolia Vale Drive		Transaction ID: 20071029-12228-23-3	
City State Zip Code Chattanooga TN 37419-2164	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CLAIMS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

SUBTOTAL of Receipts This Page (optional) ▶	29.62
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Michele A Powers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 337 Magnolia Vale Drive		Transaction ID: 20071112-12194-23-3	
City State Zip Code Chattanooga TN 37419-2164	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CLAIMS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

Full Name (Last, First, Middle Initial) B. Michele A Powers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 337 Magnolia Vale Drive		Transaction ID: 20071126-12172-23-3	
City State Zip Code Chattanooga TN 37419-2164	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation CLAIMS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

Full Name (Last, First, Middle Initial) C. John C Rademacher		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 746 Calabria Lane		Transaction ID: 20071029-13008-23-3	
City State Zip Code Ambler PA 19002-1539	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation OPERATIONS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

SUBTOTAL of Receipts This Page (optional) ▶	44.24
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. John F Rausch		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 14615 N 12th Street		Transaction ID: 20071029-8343-23-3
City State Zip Code Phoenix AZ 85022-3810	Amount of Each Receipt this Period 9.62	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88	

Full Name (Last, First, Middle Initial) B. John F Rausch		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 14615 N 12th Street		Transaction ID: 20071112-8324-23-3
City State Zip Code Phoenix AZ 85022-3810	Amount of Each Receipt this Period 9.62	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88	

Full Name (Last, First, Middle Initial) C. John F Rausch		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 14615 N 12th Street		Transaction ID: 20071126-8312-23-3
City State Zip Code Phoenix AZ 85022-3810	Amount of Each Receipt this Period 9.62	
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88	

SUBTOTAL of Receipts This Page (optional) ▶	28.86
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 142 / 195						
	(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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. William J Reedy		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 1539 E Hackamore Street		Transaction ID: 20071029-8146-23-3
City State Zip Code Mesa AZ 85203-3813	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation URGENT CARE PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) B. William J Reedy		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 1539 E Hackamore Street		Transaction ID: 20071112-8128-23-3
City State Zip Code Mesa AZ 85203-3813	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation URGENT CARE PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. William J Reedy		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 1539 E Hackamore Street		Transaction ID: 20071126-8117-23-3
City State Zip Code Mesa AZ 85203-3813	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation URGENT CARE PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Brett A Reinholz		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 21 West Street Apt. 4A		Transaction ID: 20071112-5540-23-3	
City State Zip Code New York NY 10006-2921	Amount of Each Receipt this Period 8.74		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.76		

Full Name (Last, First, Middle Initial) B. Brett A Reinholz		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 21 West Street Apt. 4A		Transaction ID: 20071126-5533-23-3	
City State Zip Code New York NY 10006-2921	Amount of Each Receipt this Period 8.74		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation FINANCIAL ANALYSIS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.76		

Full Name (Last, First, Middle Initial) C. Jane L Renninger		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 73 Tyler Court		Transaction ID: 20071029-3297-23-3	
City State Zip Code Avon CT 06001-3165	Amount of Each Receipt this Period 13.27		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation COMPLIANCE MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.43		

SUBTOTAL of Receipts This Page (optional) ▶	30.75
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jane L Renninger

Mailing Address 73 Tyler Court

City Avon State CT Zip Code 06001-3165

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: COMPLIANCE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 311.43

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-3286-23-3

Amount of Each Receipt this Period
13.27

B. Full Name (Last, First, Middle Initial)
Jane L Renninger

Mailing Address 73 Tyler Court

City Avon State CT Zip Code 06001-3165

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: COMPLIANCE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 311.43

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-3285-23-3

Amount of Each Receipt this Period
13.27

C. Full Name (Last, First, Middle Initial)
Thomas B Richards

Mailing Address 3 Scarborough Road

City Simsbury State CT Zip Code 06070-1257

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: VP PRODUCT LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-830-23-3

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)	▶	51.54
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 145 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Thomas B Richards

Mailing Address 3 Scarborough Road

City State Zip Code
Simsbury CT 06070-1257

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO VP PRODUCT LEADER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-829-23-3

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Thomas B Richards

Mailing Address 3 Scarborough Road

City State Zip Code
Simsbury CT 06070-1257

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO VP PRODUCT LEADER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-828-23-3

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Nancy E Richmond

Mailing Address 503 Willow Hedge Court

City State Zip Code
Monroeville PA 15146-1242

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO OPERATIONS SENIOR DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-4077-23-3

Amount of Each Receipt this Period
10.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Nancy E Richmond		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 503 Willow Hedge Court		Transaction ID: 20071112-4064-23-3	
City State Zip Code Monroeville PA 15146-1242	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Nancy E Richmond		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 503 Willow Hedge Court		Transaction ID: 20071126-4061-23-3	
City State Zip Code Monroeville PA 15146-1242	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Catherine M Riley		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 1 Sand Dollar Drive		Transaction ID: 20071029-2714-23-3	
City State Zip Code Isle of Palms SC 29451-2648	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROJECT MANAGEMENT SR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Catherine M Riley		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 1 Sand Dollar Drive		Transaction ID: 20071112-2706-23-3	
City State Zip Code Isle of Palms SC 29451-2648		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation PROJECT MANAGEMENT SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Catherine M Riley		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 1 Sand Dollar Drive		Transaction ID: 20071126-2706-23-3	
City State Zip Code Isle of Palms SC 29451-2648		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation PROJECT MANAGEMENT SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Sherry W Rodriguez		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 292 W Parkwood Road		Transaction ID: 20071029-5231-23-3	
City State Zip Code Decatur GA 30030-2821		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sherry W Rodriguez

Mailing Address 292 W Parkwood Road

City State Zip Code
Decatur GA 30030-2821

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE OPERATIONS DIRECTOR
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 15 / 2007

Transaction ID: 20071112-5215-23-3

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Sherry W Rodriguez

Mailing Address 292 W Parkwood Road

City State Zip Code
Decatur GA 30030-2821

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE OPERATIONS DIRECTOR
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 29 / 2007

Transaction ID: 20071126-5209-23-3

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Michael G Rogers

Mailing Address 37 W Goshen Avenue

City State Zip Code
Clovis CA 93611-7196

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE OPERATIONS DIRECTOR
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 345.08

Date of Receipt
M M / D D / Y Y Y Y
11 / 01 / 2007

Transaction ID: 20071029-9002-23-3

Amount of Each Receipt this Period
14.67

SUBTOTAL of Receipts This Page (optional)	▶	34.67
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Michael G Rogers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 37 W Goshen Avenue		Transaction ID: 20071112-8980-23-3	
City State Zip Code Clovis CA 93611-7196	Amount of Each Receipt this Period 14.67		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.08		

Full Name (Last, First, Middle Initial) B. Michael G Rogers		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 37 W Goshen Avenue		Transaction ID: 20071126-8967-23-3	
City State Zip Code Clovis CA 93611-7196	Amount of Each Receipt this Period 14.67		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.08		

Full Name (Last, First, Middle Initial) C. Karen S Rohan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 13 Fisherdick Road		Transaction ID: 20071029-181-23-3	
City State Zip Code Ware MA 01082-9775	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PRESIDENT HEALTHCARE SUBSID		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

SUBTOTAL of Receipts This Page (optional) ▶	79.34
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Karen S Rohan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 13 Fisherdick Road		Transaction ID: 20071112-181-23-3
City State Zip Code Ware MA 01082-9775	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PRESIDENT HEALTHCARE SUBSID	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Karen S Rohan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 13 Fisherdick Road		Transaction ID: 20071126-181-23-3
City State Zip Code Ware MA 01082-9775	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PRESIDENT HEALTHCARE SUBSID	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Michael J Ross		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 147 Old Gulph Road		Transaction ID: 20071029-13482-23-3
City State Zip Code Wynnewood PA 19096-1016	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00	

SUBTOTAL of Receipts This Page (optional) ▶	185.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Michael J Ross		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 147 Old Gulph Road		Transaction ID: 20071112-13434-23-3	
City State Zip Code Wynnewood PA 19096-1016		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LIFE INS. CO. OF NORTH AMERICA VP MARKETING			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2040.00	

Full Name (Last, First, Middle Initial) B. Michael J Ross		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 147 Old Gulph Road		Transaction ID: 20071126-13410-23-3	
City State Zip Code Wynnewood PA 19096-1016		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LIFE INS. CO. OF NORTH AMERICA VP MARKETING			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2040.00	

Full Name (Last, First, Middle Initial) C. Rosanne T Rosty		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address PO Box 8365		Transaction ID: 20071112-11680-23-3	
City State Zip Code Saddle Brook NJ 07663-8365		Amount of Each Receipt this Period 8.85	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CT GENERAL LIFE INSURANCE CO TRAINING SENIOR SPECIALIST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 212.40	

SUBTOTAL of Receipts This Page (optional) ▶	178.85
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Rosanne T Rosty		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address PO Box 8365		Transaction ID: 20071126-11660-23-3	
City State Zip Code Saddle Brook NJ 07663-8365		Amount of Each Receipt this Period 8.85	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation TRAINING SENIOR SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 212.40	

Full Name (Last, First, Middle Initial) B. Jonathan N Rubin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 108 W Mountain Road		Transaction ID: 20071029-1465-23-3	
City State Zip Code West Simsbury CT 06092-2530		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SVP BFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1445.00	

Full Name (Last, First, Middle Initial) C. Jonathan N Rubin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 108 W Mountain Road		Transaction ID: 20071112-1465-23-3	
City State Zip Code West Simsbury CT 06092-2530		Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation SVP BFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1445.00	

SUBTOTAL of Receipts This Page (optional) ▶	178.85
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 153 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jonathan N Rubin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 108 W Mountain Road		Transaction ID: 20071126-1466-23-3
City State Zip Code West Simsbury CT 06092-2530	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SVP BFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1445.00	

Full Name (Last, First, Middle Initial) B. Jean C Rush		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 73 Cidermill Heights		Transaction ID: 20071029-307-23-3
City State Zip Code North Granby CT 06060-1428	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Jean C Rush		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 73 Cidermill Heights		Transaction ID: 20071112-306-23-3
City State Zip Code North Granby CT 06060-1428	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jean C Rush		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 73 Cidermill Heights		Transaction ID: 20071126-306-23-3	
City State Zip Code North Granby CT 06060-1428		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CT GENERAL LIFE INSURANCE CO OPERATIONS SENIOR DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. David A Russell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 48 Winterset Lane		Transaction ID: 20071029-2445-23-3	
City State Zip Code Simsbury CT 06070-1739		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CIGNA CORPORATION ACTUARIAL SENIOR DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. David A Russell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 48 Winterset Lane		Transaction ID: 20071112-2439-23-3	
City State Zip Code Simsbury CT 06070-1739		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CIGNA CORPORATION ACTUARIAL SENIOR DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. David A Russell		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 48 Winterset Lane		Transaction ID: 20071126-2439-23-3	
City Simsbury	State CT	Zip Code 06070-1739	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation ACTUARIAL SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Thomas M Sakorafis		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 1009 Glenhill Drive		Transaction ID: 20071029-6143-23-3	
City Northville	State MI	Zip Code 48167-1069	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Thomas M Sakorafis		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 1009 Glenhill Drive		Transaction ID: 20071112-6130-23-3	
City Northville	State MI	Zip Code 48167-1069	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Thomas M Sakorafis		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 1009 Glenhill Drive		Transaction ID: 20071126-6122-23-3
City Northville	State Zip Code MI 48167-1069	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ACCOUNT MANAGER-NATIONAL ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Richard B Salmon		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address 5 Hawks Ridge		Transaction ID: 20071029-2474-23-3
City Avon	State Zip Code CT 06001-4417	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation NATIONAL MEDICAL SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) C. Richard B Salmon		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 5 Hawks Ridge		Transaction ID: 20071112-2468-23-3
City Avon	State Zip Code CT 06001-4417	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation NATIONAL MEDICAL SR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Richard B Salmon Mailing Address 5 Hawks Ridge City Avon State CT Zip Code 06001-4417 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7 Transaction ID: 20071126-2468-23-3 Amount of Each Receipt this Period 30.00
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: NATIONAL MEDICAL SR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 720.00		

B. Full Name (Last, First, Middle Initial) David N Sasportas Mailing Address 125 Wadhams Road City Bloomfield State CT Zip Code 06002-1250 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7 Transaction ID: 20071029-517-23-3 Amount of Each Receipt this Period 20.00
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: APP DEVELOPMENT DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00		

C. Full Name (Last, First, Middle Initial) David N Sasportas Mailing Address 125 Wadhams Road City Bloomfield State CT Zip Code 06002-1250 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7 Transaction ID: 20071112-516-23-3 Amount of Each Receipt this Period 20.00
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: APP DEVELOPMENT DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. David N Sasportas		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 125 Wadhams Road		Transaction ID: 20071126-516-23-3	
City State Zip Code Bloomfield CT 06002-1250	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation APP DEVELOPMENT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) B. Frank Sataline		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 18 Wyndham Lane		Transaction ID: 20071029-592-23-3	
City State Zip Code Farmington CT 06032-2758	Amount of Each Receipt this Period 70.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation REAL ESTATE SR MANAGING DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1190.00		

Full Name (Last, First, Middle Initial) C. Frank Sataline		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 18 Wyndham Lane		Transaction ID: 20071112-591-23-3	
City State Zip Code Farmington CT 06032-2758	Amount of Each Receipt this Period 70.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation REAL ESTATE SR MANAGING DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1190.00		

SUBTOTAL of Receipts This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Frank Sataline		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 18 Wyndham Lane		Transaction ID: 20071126-591-23-3	
City State Zip Code Farmington CT 06032-2758	Amount of Each Receipt this Period 70.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation REAL ESTATE SR MANAGING DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1190.00		

Full Name (Last, First, Middle Initial) B. David A Savino		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 91 Trumbull Lane		Transaction ID: 20071029-777-23-3	
City State Zip Code South Windsor CT 06074-2369	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation AUDIT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. David A Savino		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 91 Trumbull Lane		Transaction ID: 20071112-777-23-3	
City State Zip Code South Windsor CT 06074-2369	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation AUDIT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. David A Savino		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 91 Trumbull Lane		Transaction ID: 20071126-776-23-3	
City State Zip Code South Windsor CT 06074-2369	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation AUDIT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. David S Scheibe		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 257 Linden Street		Transaction ID: 20071029-1731-23-3	
City State Zip Code Moorestown NJ 08057-3622	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation TREASURY SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) C. David S Scheibe		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 257 Linden Street		Transaction ID: 20071112-1727-23-3	
City State Zip Code Moorestown NJ 08057-3622	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation TREASURY SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional) ▶	50.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
David S Scheibe

Mailing Address 257 Linden Street

City State Zip Code
Moorestown NJ 08057-3622

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AMERICA TREASURY SENIOR DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-1727-23-3

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Scott D Schneider

Mailing Address 34 Burning Tree

City State Zip Code
Glastonbury CT 06033-1496

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO ACTUARIAL SENIOR DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 228.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-5579-23-3

Amount of Each Receipt this Period
9.50

C. Full Name (Last, First, Middle Initial)
Scott D Schneider

Mailing Address 34 Burning Tree

City State Zip Code
Glastonbury CT 06033-1496

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO ACTUARIAL SENIOR DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 228.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-5563-23-3

Amount of Each Receipt this Period
9.50

SUBTOTAL of Receipts This Page (optional)	39.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Scott D Schneider

Mailing Address 34 Burning Tree

City State Zip Code
Glastonbury CT 06033-1496

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO ACTUARIAL SENIOR DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 228.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-5556-23-3

Amount of Each Receipt this Period
9.50

B. Full Name (Last, First, Middle Initial)
Mordecai Schwartz

Mailing Address 717 Haviland Drive

City State Zip Code
Bryn Mawr PA 19010-1151

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

Name of Employer Occupation
CIGNA CORPORATION SVP TREASURY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-7392-23-3

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Mordecai Schwartz

Mailing Address 717 Haviland Drive

City State Zip Code
Bryn Mawr PA 19010-1151

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

Name of Employer Occupation
CIGNA CORPORATION SVP TREASURY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-7378-23-3

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	▶	69.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Mordecai Schwartz		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 717 Haviland Drive		Transaction ID: 20071126-7366-23-3	
City State Zip Code Bryn Mawr PA 19010-1151	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation SVP TREASURY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00		

Full Name (Last, First, Middle Initial) B. Brian D Setzer		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 117 Wentworth Avenue		Transaction ID: 20071029-6978-23-3	
City State Zip Code Nashville TN 37215-2229	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKET RESEARCH DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

Full Name (Last, First, Middle Initial) C. Brian D Setzer		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 117 Wentworth Avenue		Transaction ID: 20071112-6964-23-3	
City State Zip Code Nashville TN 37215-2229	Amount of Each Receipt this Period 9.62		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKET RESEARCH DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88		

SUBTOTAL of Receipts This Page (optional) ▶	49.24
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 164 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

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

Mailing Address 117 Wentworth Avenue

City State Zip Code
Nashville TN 37215-2229

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO MARKET RESEARCH DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.88

Date of Receipt
M M / D D / Y Y Y Y
11 / 29 / 2007

Transaction ID: 20071126-6955-23-3

Amount of Each Receipt this Period
9.62

B. Full Name (Last, First, Middle Initial)
John A Shaw

Mailing Address 18 Powder Horn Drive

City State Zip Code
Simsbury CT 06070-1712

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO INVESTMENT MANAGING DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 01 / 2007

Transaction ID: 20071029-1143-23-3

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
John A Shaw

Mailing Address 18 Powder Horn Drive

City State Zip Code
Simsbury CT 06070-1712

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO INVESTMENT MANAGING DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 15 / 2007

Transaction ID: 20071112-1142-23-3

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)	▶	29.62
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. John A Shaw		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 18 Powder Horn Drive		Transaction ID: 20071126-1141-23-3	
City State Zip Code Simsbury CT 06070-1712	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INVESTMENT MANAGING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. J. L Shearer		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address PO Box 189 44 Matthew Drive		Transaction ID: 20071112-11506-23-3	
City State Zip Code Auburn NH 03032-0189	Amount of Each Receipt this Period 8.75		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation BUSINESS COMM MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. J. L Shearer		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address PO Box 189 44 Matthew Drive		Transaction ID: 20071126-11486-23-3	
City State Zip Code Auburn NH 03032-0189	Amount of Each Receipt this Period 8.75		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation BUSINESS COMM MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional) ▶	27.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Stephen J Sherry		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 597 Cheese Spring Road		Transaction ID: 20071029-2233-23-3
City State Zip Code New Canaan CT 06840-2917	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 13.17
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SALES MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 726.70	

Full Name (Last, First, Middle Initial) B. Stephen J Sherry		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 597 Cheese Spring Road		Transaction ID: 20071112-2228-23-3
City State Zip Code New Canaan CT 06840-2917	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 13.17
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SALES MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 726.70	

Full Name (Last, First, Middle Initial) C. Stephen J Sherry		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 597 Cheese Spring Road		Transaction ID: 20071126-2228-23-3
City State Zip Code New Canaan CT 06840-2917	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 13.55
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SALES MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 726.70	

SUBTOTAL of Receipts This Page (optional)	▶	39.89
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael D Slice

Mailing Address 19422 N 73rd Avenue

City State Zip Code
Glendale AZ 85308-5678

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

Name of Employer
CIGNA HEALTHCARE OF AZ, INC

Occupation
OPERATIONS DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.88

Date of Receipt
M M / D D / Y Y Y Y
11 / 01 / 2007

Transaction ID: 20071029-4898-23-3

Amount of Each Receipt this Period
9.62

B. Full Name (Last, First, Middle Initial)
Michael D Slice

Mailing Address 19422 N 73rd Avenue

City State Zip Code
Glendale AZ 85308-5678

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

Name of Employer
CIGNA HEALTHCARE OF AZ, INC

Occupation
OPERATIONS DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.88

Date of Receipt
M M / D D / Y Y Y Y
11 / 15 / 2007

Transaction ID: 20071112-4881-23-3

Amount of Each Receipt this Period
9.62

C. Full Name (Last, First, Middle Initial)
Michael D Slice

Mailing Address 19422 N 73rd Avenue

City State Zip Code
Glendale AZ 85308-5678

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

Name of Employer
CIGNA HEALTHCARE OF AZ, INC

Occupation
OPERATIONS DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.88

Date of Receipt
M M / D D / Y Y Y Y
11 / 29 / 2007

Transaction ID: 20071126-4877-23-3

Amount of Each Receipt this Period
9.62

SUBTOTAL of Receipts This Page (optional)	▶	28.86
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Donald R Spelhaug

Mailing Address 5710 W Arrowhead Lakes Drive

City State Zip Code
Glendale AZ 85308-6217

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

Name of Employer
CIGNA HEALTHCARE OF AZ, INC

Occupation
ADULT MEDICINE PRACTITIONER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2007

Transaction ID: 20071029-8209-23-3

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Donald R Spelhaug

Mailing Address 5710 W Arrowhead Lakes Drive

City State Zip Code
Glendale AZ 85308-6217

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

Name of Employer
CIGNA HEALTHCARE OF AZ, INC

Occupation
ADULT MEDICINE PRACTITIONER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2007

Transaction ID: 20071112-8191-23-3

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Donald R Spelhaug

Mailing Address 5710 W Arrowhead Lakes Drive

City State Zip Code
Glendale AZ 85308-6217

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

Name of Employer
CIGNA HEALTHCARE OF AZ, INC

Occupation
ADULT MEDICINE PRACTITIONER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: 20071126-8180-23-3

Amount of Each Receipt this Period
20.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Otha T Spriggs		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 66 Cedar Hill Lane		Transaction ID: 20071029-11999-23-3
City State Zip Code Media PA 19063-6311	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP HUMAN RESOURCES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00	

Full Name (Last, First, Middle Initial) B. Otha T Spriggs		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 66 Cedar Hill Lane		Transaction ID: 20071112-11965-23-3
City State Zip Code Media PA 19063-6311	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP HUMAN RESOURCES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00	

Full Name (Last, First, Middle Initial) C. Otha T Spriggs		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 66 Cedar Hill Lane		Transaction ID: 20071126-11943-23-3
City State Zip Code Media PA 19063-6311	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP HUMAN RESOURCES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2040.00	

SUBTOTAL of Receipts This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 / 195
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jennifer Stepp		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 5833 Carrollton Avenue		Transaction ID: 20071029-5508-23-3
City Indianapolis	State IN	Zip Code 46220-2617
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 56.85
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 497.17	

Full Name (Last, First, Middle Initial) B. Jennifer Stepp		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 5833 Carrollton Avenue		Transaction ID: 20071112-5492-23-3
City Indianapolis	State IN	Zip Code 46220-2617
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 6.15
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 497.17	

Full Name (Last, First, Middle Initial) C. Jennifer Stepp		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 5833 Carrollton Avenue		Transaction ID: 20071126-5485-23-3
City Indianapolis	State IN	Zip Code 46220-2617
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.96
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 497.17	

SUBTOTAL of Receipts This Page (optional)	▶	100.96
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 171 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Cathrin Stickney		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 69 W 9th Street Apt. 5G		Transaction ID: 20071029-10356-23-3 Amount of Each Receipt this Period 18.00
City New York	State Zip Code NY 10011-8977	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SEGMENT MARKETING SR DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	

Full Name (Last, First, Middle Initial) B. Cathrin Stickney		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 69 W 9th Street Apt. 5G		Transaction ID: 20071112-10324-23-3 Amount of Each Receipt this Period 18.00
City New York	State Zip Code NY 10011-8977	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SEGMENT MARKETING SR DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	

Full Name (Last, First, Middle Initial) C. Cathrin Stickney		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 69 W 9th Street Apt. 5G		Transaction ID: 20071126-10309-23-3 Amount of Each Receipt this Period 18.00
City New York	State Zip Code NY 10011-8977	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SEGMENT MARKETING SR DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	

SUBTOTAL of Receipts This Page (optional) ▶	54.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Mark D Still Mailing Address 350 Hillside Street City Yarmouth State ME Zip Code 04096-8379 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7 Transaction ID: 20071029-272-23-3 Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation PROVIDER CONTRACTING MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

B. Full Name (Last, First, Middle Initial) Mark D Still Mailing Address 350 Hillside Street City Yarmouth State ME Zip Code 04096-8379 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7 Transaction ID: 20071112-271-23-3 Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation PROVIDER CONTRACTING 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) Mark D Still Mailing Address 350 Hillside Street City Yarmouth State ME Zip Code 04096-8379 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7 Transaction ID: 20071126-271-23-3 Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation PROVIDER CONTRACTING MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Daniel M Sullivan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 108 Governors Way		Transaction ID: 20071029-2005-23-3	
City State Zip Code Brentwood TN 37027-8932	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) B. Daniel M Sullivan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 108 Governors Way		Transaction ID: 20071112-2000-23-3	
City State Zip Code Brentwood TN 37027-8932	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Daniel M Sullivan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 108 Governors Way		Transaction ID: 20071126-2000-23-3	
City State Zip Code Brentwood TN 37027-8932	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation OPERATIONS SENIOR DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Mark S Swayne		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 43 Seminary Road		Transaction ID: 20071112-1928-23-3
City Simsbury	State CT	Zip Code 06070-2026
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.80
Name of Employer CIGNA CORPORATION	Occupation MARKETING COMM MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.20	

Full Name (Last, First, Middle Initial) B. Mark S Swayne		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 43 Seminary Road		Transaction ID: 20071126-1928-23-3
City Simsbury	State CT	Zip Code 06070-2026
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8.80
Name of Employer CIGNA CORPORATION	Occupation MARKETING COMM MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.20	

Full Name (Last, First, Middle Initial) C. Shelly Swinford		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 5 Pinnacle Mountain Road		Transaction ID: 20071029-5479-23-3
City Simsbury	State CT	Zip Code 06070-1808
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.75
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation BUSINESS PROJECT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 371.98	

SUBTOTAL of Receipts This Page (optional)	▶	33.35
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Shelly Swinford		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 5 Pinnacle Mountain Road		Transaction ID: 20071112-5463-23-3
City State Zip Code Simsbury CT 06070-1808	Amount of Each Receipt this Period 15.75	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation BUSINESS PROJECT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 371.98	

Full Name (Last, First, Middle Initial) B. Shelly Swinford		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 5 Pinnacle Mountain Road		Transaction ID: 20071126-5456-23-3
City State Zip Code Simsbury CT 06070-1808	Amount of Each Receipt this Period 15.75	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation BUSINESS PROJECT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 371.98	

Full Name (Last, First, Middle Initial) C. Jan C Sykes		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address PO Box 32414		Transaction ID: 20071029-12005-23-3
City State Zip Code Phoenix AZ 85064-2414	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation OPERATIONS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	41.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jan C Sykes		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address PO Box 32414		Transaction ID: 20071112-11971-23-3	
City State Zip Code Phoenix AZ 85064-2414	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation OPERATIONS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Jan C Sykes		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address PO Box 32414		Transaction ID: 20071126-11949-23-3	
City State Zip Code Phoenix AZ 85064-2414	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation OPERATIONS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Taghi Tavassoli		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 5839 E Sanna Street		Transaction ID: 20071029-6267-23-3	
City State Zip Code Paradise Valley AZ 85253-1763	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation UROLOGIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Taghi Tavassoli		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 5839 E Sanna Street		Transaction ID: 20071112-6252-23-3
City State Zip Code Paradise Valley AZ 85253-1763	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation UROLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Taghi Tavassoli		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 5839 E Sanna Street		Transaction ID: 20071126-6243-23-3
City State Zip Code Paradise Valley AZ 85253-1763	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation UROLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. William A Taylor		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 26 Westmoreland Drive		Transaction ID: 20071029-986-23-3
City State Zip Code West Hartford CT 06117-2656	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INVESTMENT MANAGING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. William A Taylor		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 26 Westmoreland Drive		Transaction ID: 20071112-985-23-3	
City State Zip Code West Hartford CT 06117-2656	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INVESTMENT MANAGING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. William A Taylor		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 26 Westmoreland Drive		Transaction ID: 20071126-983-23-3	
City State Zip Code West Hartford CT 06117-2656	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation INVESTMENT MANAGING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Jeff S Terrill		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 9556 E Cortez Street		Transaction ID: 20071029-11081-23-3	
City State Zip Code Scottsdale AZ 85260-5866	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional) ▶	40.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeff S Terrill

Mailing Address 9556 E Cortez Street

City State Zip Code
Scottsdale AZ 85260-5866

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO GENERAL MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-11049-23-3

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Jeff S Terrill

Mailing Address 9556 E Cortez Street

City State Zip Code
Scottsdale AZ 85260-5866

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO GENERAL MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-11030-23-3

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Thackeray

Mailing Address 317 Derby Lane

City State Zip Code
Franklin TN 37069-4516

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO UNDERWRITING SENIOR DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 281.35

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-259-23-3

Amount of Each Receipt this Period
11.90

SUBTOTAL of Receipts This Page (optional)	▶	51.90
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jeffrey Thackeray		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 317 Derby Lane		Transaction ID: 20071112-258-23-3
City State Zip Code Franklin TN 37069-4516	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 11.90
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation UNDERWRITING SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 281.35	

Full Name (Last, First, Middle Initial) B. Jeffrey Thackeray		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 317 Derby Lane		Transaction ID: 20071126-258-23-3
City State Zip Code Franklin TN 37069-4516	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 11.90
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation UNDERWRITING SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 281.35	

Full Name (Last, First, Middle Initial) C. Nancy E Tucker		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address 522 E Commerce Street		Transaction ID: 20071029-6199-23-3
City State Zip Code Milford MI 48381-1720	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5.77
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SENIOR ACCOUNT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 533.67	

SUBTOTAL of Receipts This Page (optional)	▶	29.57
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 181 / 195
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Nancy E Tucker

Mailing Address 522 E Commerce Street

City State Zip Code
Milford MI 48381-1720

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SENIOR ACCOUNT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
533.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 7

Transaction ID: 20071112-6185-23-3

Amount of Each Receipt this Period
5.77

B. Full Name (Last, First, Middle Initial)
Nancy E Tucker

Mailing Address 522 E Commerce Street

City State Zip Code
Milford MI 48381-1720

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SENIOR ACCOUNT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
533.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 7

Transaction ID: 20071126-6177-23-3

Amount of Each Receipt this Period
53.27

C. Full Name (Last, First, Middle Initial)
Amy J Turkington

Mailing Address 2253 Garden Drive

City State Zip Code
Avon OH 44011-2608

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
COMMUNICATIONS DIRECTOR I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 20071029-5214-23-3

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)	69.04
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 / 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Amy J Turkington		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
Mailing Address 2253 Garden Drive		Transaction ID: 20071112-5198-23-3
City Avon	State OH	Zip Code 44011-2608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation COMMUNICATIONS DIRECTOR I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Amy J Turkington		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 2253 Garden Drive		Transaction ID: 20071126-5192-23-3
City Avon	State OH	Zip Code 44011-2608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation COMMUNICATIONS DIRECTOR I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Katharine L Wade		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address PO Box 241		Transaction ID: 20071029-900-23-3
City Simsbury	State CT	Zip Code 06070-0241
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer CIGNA CORPORATION	Occupation GOVERNMENT AFFAIRS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	▶	35.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Katharine L Wade		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address PO Box 241		Transaction ID: 20071112-899-23-3	
City Simsbury	State CT	Zip Code 06070-0241	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation GOVERNMENT AFFAIRS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) B. Katharine L Wade		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address PO Box 241		Transaction ID: 20071126-898-23-3	
City Simsbury	State CT	Zip Code 06070-0241	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIGNA CORPORATION	Occupation GOVERNMENT AFFAIRS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Joseph Wankerl		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 514 Mount Vernon Road		Transaction ID: 20071029-12144-23-3	
City Plantsville	State CT	Zip Code 06479-1228	Amount of Each Receipt this Period 10.10
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.40		

SUBTOTAL of Receipts This Page (optional) ▶	40.10
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Joseph Wankerl		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 514 Mount Vernon Road		Transaction ID: 20071112-12110-23-3	
City State Zip Code Plantsville CT 06479-1228	Amount of Each Receipt this Period 10.10		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.40		

Full Name (Last, First, Middle Initial) B. Joseph Wankerl		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 514 Mount Vernon Road		Transaction ID: 20071126-12087-23-3	
City State Zip Code Plantsville CT 06479-1228	Amount of Each Receipt this Period 10.10		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.40		

Full Name (Last, First, Middle Initial) C. Scott D Watson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 1813 Shadywood Court		Transaction ID: 20071029-5980-23-3	
City State Zip Code Chesterfield MO 63017-5440	Amount of Each Receipt this Period 15.38		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation ACCOUNT MANAGER-NATIONAL ACCTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 597.72		

SUBTOTAL of Receipts This Page (optional) ▶	35.58
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Scott D Watson		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 1813 Shadywood Court		Transaction ID: 20071112-5965-23-3
City State Zip Code Chesterfield MO 63017-5440	Amount of Each Receipt this Period 15.38	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation ACCOUNT MANAGER-NATIONAL ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 597.72	

Full Name (Last, First, Middle Initial) B. Scott D Watson		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 1813 Shadywood Court		Transaction ID: 20071126-5957-23-3
City State Zip Code Chesterfield MO 63017-5440	Amount of Each Receipt this Period 15.38	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation ACCOUNT MANAGER-NATIONAL ACCTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 597.72	

Full Name (Last, First, Middle Initial) C. Richard M White		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 68 Longwood Drive		Transaction ID: 20071029-2441-23-3
City State Zip Code Portland ME 04102-1524	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation PROVIDER CONTRACTING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional) ▶	50.76
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Richard M White Mailing Address 68 Longwood Drive City Portland State ME Zip Code 04102-1524 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071112-2435-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	5	/	2	0	0	7	20.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	5	/	2	0	0	7														
20.00																							
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: PROVIDER CONTRACTING DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>480.00</td> </tr> </table>		480.00																					
480.00																							

B. Full Name (Last, First, Middle Initial) Richard M White Mailing Address 68 Longwood Drive City Portland State ME Zip Code 04102-1524 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071126-2435-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	9	/	2	0	0	7	20.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	2	9	/	2	0	0	7														
20.00																							
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: PROVIDER CONTRACTING DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>480.00</td> </tr> </table>		480.00																					
480.00																							

C. Full Name (Last, First, Middle Initial) Wallace W White Mailing Address 150 Horizon Lane City Glastonbury State CT Zip Code 06033-2856 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20071029-992-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	0	7	10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	1	/	2	0	0	7														
10.00																							
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: ACCOUNTING MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>240.00</td> </tr> </table>		240.00																					
240.00																							

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>50.00</td></tr></table>	50.00
50.00			
TOTAL 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Wallace W White		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 150 Horizon Lane		Transaction ID: 20071112-991-23-3	
City State Zip Code Glastonbury CT 06033-2856		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation ACCOUNTING MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Wallace W White		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 150 Horizon Lane		Transaction ID: 20071126-989-23-3	
City State Zip Code Glastonbury CT 06033-2856		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation ACCOUNTING MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Rebekah C Whitehouse		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 2640 W Tulsa Street		Transaction ID: 20071029-11919-23-3	
City State Zip Code Chandler AZ 85224-4174		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation MARKETING COMM SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional) ▶	40.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Rebekah C Whitehouse		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 2640 W Tulsa Street		Transaction ID: 20071112-11885-23-3
City State Zip Code Chandler AZ 85224-4174	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKETING COMM SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) B. Rebekah C Whitehouse		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 2640 W Tulsa Street		Transaction ID: 20071126-11864-23-3
City State Zip Code Chandler AZ 85224-4174	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MARKETING COMM SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. Jo A Winters-Burdek		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 240 Sand Key Estates Drive Apt. 78		Transaction ID: 20071112-5485-23-3
City State Zip Code Clearwater FL 33767-2932	Amount of Each Receipt this Period 9.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SERVICE SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

SUBTOTAL of Receipts This Page (optional) ▶	49.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 189 / 195						
	(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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Jo A Winters-Burdek		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 240 Sand Key Estates Drive Apt. 78		Transaction ID: 20071126-5478-23-3	
City State Zip Code Clearwater FL 33767-2932	Amount of Each Receipt this Period 9.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SERVICE SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00		

Full Name (Last, First, Middle Initial) B. Martha M Wood		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 1403 Delaware Avenue Apt. 1		Transaction ID: 20071029-3214-23-3	
City State Zip Code Wilmington DE 19806-3058	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation BUSINESS PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Martha M Wood		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 1403 Delaware Avenue Apt. 1		Transaction ID: 20071112-3204-23-3	
City State Zip Code Wilmington DE 19806-3058	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation BUSINESS PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	29.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Martha M Wood		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 1403 Delaware Avenue Apt. 1		Transaction ID: 20071126-3203-23-3	
City State Zip Code Wilmington DE 19806-3058	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation BUSINESS PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Allen R Woolf		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 422 Witley Road		Transaction ID: 20071029-1439-23-3	
City State Zip Code Wynnewood PA 19096-2425	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation VP NATIONAL MEDICAL OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

Full Name (Last, First, Middle Initial) C. Allen R Woolf		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 422 Witley Road		Transaction ID: 20071112-1439-23-3	
City State Zip Code Wynnewood PA 19096-2425	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation VP NATIONAL MEDICAL OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 / 195
	<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)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Allen R Woolf		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 422 Witley Road		Transaction ID: 20071126-1440-23-3
City State Zip Code Wynnewood PA 19096-2425	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation VP NATIONAL MEDICAL OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) B. Bu Yang		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 121 High Wood Drive		Transaction ID: 20071029-11038-23-3
City State Zip Code South Glastonbury CT 06073-2908	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ARCHITECTURE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Bu Yang		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 121 High Wood Drive		Transaction ID: 20071112-11006-23-3
City State Zip Code South Glastonbury CT 06073-2908	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation ARCHITECTURE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional) ▶	55.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 / 195
	<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)
CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Bu Yang		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 121 High Wood Drive		Transaction ID: 20071126-10987-23-3	
City State Zip Code South Glastonbury CT 06073-2908		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation ARCHITECTURE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	

B. Full Name (Last, First, Middle Initial) Robert J Youell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 21 Blood Road		Transaction ID: 20071112-10356-23-3	
City State Zip Code Andover MA 01810-4701		Amount of Each Receipt this Period 9.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation FINANCIAL ANALYSIS SR SPEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00	

C. Full Name (Last, First, Middle Initial) Robert J Youell		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 21 Blood Road		Transaction ID: 20071126-10339-23-3	
City State Zip Code Andover MA 01810-4701		Amount of Each Receipt this Period 9.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation FINANCIAL ANALYSIS SR SPEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00	

SUBTOTAL of Receipts This Page (optional) ▶	33.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 / 195		
	<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

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NAME OF COMMITTEE (In Full)
CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Michael J Young		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7	
Mailing Address 5 Frost Road		Transaction ID: 20071029-3873-23-3	
City State Zip Code Cinnaminson NJ 08077-4087	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation FINANCIAL ANALYSIS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Michael J Young		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	
Mailing Address 5 Frost Road		Transaction ID: 20071112-3860-23-3	
City State Zip Code Cinnaminson NJ 08077-4087	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation FINANCIAL ANALYSIS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Michael J Young		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7	
Mailing Address 5 Frost Road		Transaction ID: 20071126-3856-23-3	
City State Zip Code Cinnaminson NJ 08077-4087	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation FINANCIAL ANALYSIS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	30.00
TOTAL This Period (last page this line number only) ▶	10408.28

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)

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<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)
CIGNA Corporation Political Action Committee

A. Friends of Michael J. Madigan Full Name (Last, First, Middle Initial) Mailing Address PO Box 3188 City Chicago State IL Zip Code 60654 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 1058530711275665946 Date of Disbursement: 11 / 30 / 2007 Amount of Each Disbursement this Period -3000.00 Category/Type Uncashed Contribution
B. Friends of Vince Biancucci Full Name (Last, First, Middle Initial) Mailing Address 226 Pleasant Drive City Aliquippa State PA Zip Code 15001 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 5187770711275673079 Date of Disbursement: 11 / 30 / 2007 Amount of Each Disbursement this Period -300.00 Category/Type Uncashed Contribution
C. Illinois Senate Democratic Fund Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 5537 City Springfield State IL Zip Code 62705 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 9957640711275657076 Date of Disbursement: 11 / 30 / 2007 Amount of Each Disbursement this Period -2000.00 Category/Type Uncashed Contribution

SUBTOTAL of Disbursements This Page (optional) ► **-5300.00**

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)

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<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)
CIGNA Corporation Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Joe McCord Election Committee</p>		<p>Transaction ID: 4487200711275559523 Date of Disbursement</p>	
<p>Mailing Address 4222 Montvale Road</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p>	
<p>City Maryville</p>	<p>State TN</p>	<p>Zip Code 37803</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="-250.00"/></p>
<p>Purpose of Disbursement Nonfederal Contribution</p>		<p>Category/Type</p>	
<p>Candidate Name</p>		<p>Uncashed Contribution</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			
<p>B. Full Name (Last, First, Middle Initial) Konopnicki 2006</p>		<p>Transaction ID: 9875100711275568128 Date of Disbursement</p>	
<p>Mailing Address 1797 Angel Fire Lane</p>		<p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p>	
<p>City Safford</p>	<p>State AZ</p>	<p>Zip Code 85546</p>	<p>Amount of Each Disbursement this Period</p> <p><input type="text" value="-296.00"/></p>
<p>Purpose of Disbursement Nonfederal Contribution</p>		<p>Category/Type</p>	
<p>Candidate Name</p>		<p>Uncashed Contribution</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="-546.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value="-5846.00"/></p>