

# 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) 174 Waterfront Street  
Suite 500  
 Check if different than previously reported. (ACC)  
National Harbor MD 20745

2. **FEC IDENTIFICATION NUMBER** C00085316  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)  
**CITY** **STATE** **ZIP CODE**

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 05 01 2010 through 05 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer G. William Hoagland  
Signature of Treasurer Electronically Filed by G. William Hoagland Date 06 09 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
CIGNA Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		45271.27
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	48393.22									
(c) Total Receipts (from Line 19) .....	13655.55	80477.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	62048.77	125748.77								
7. Total Disbursements (from Line 31) .....	23500.00	87200.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	38548.77	38548.77								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
CIGNA Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	5667.15	20264.46
(ii) Unitemized .....	7988.40	58213.04
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	13655.55	78477.50
(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) .....	13655.55	78477.50
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	2000.00
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)) .....	13655.55	80477.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13655.55	80477.50

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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	9700.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	9700.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23500.00	69350.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	8150.00
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))..	23500.00	87200.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23500.00	87200.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	13655.55	78477.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13655.55	78477.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	9700.00
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	9700.00

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

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

FOR LINE NUMBER: PAGE 6 / 58  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Michael B. Alexander

Mailing Address 128 East 15th Street

City State Zip Code  
Ship Bottom NJ 08008

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

Name of Employer Occupation  
CBH Provider Oversight Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 296.23

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 1 0

**Transaction ID:** 20100514-14466-10-31

Amount of Each Receipt this Period  
26.93

**B.** Full Name (Last, First, Middle Initial)  
Michael B. Alexander

Mailing Address 128 East 15th Street

City State Zip Code  
Ship Bottom NJ 08008

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

Name of Employer Occupation  
CBH Provider Oversight Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 296.23

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

**Transaction ID:** 20100525-14436-9-39

Amount of Each Receipt this Period  
26.93

**C.** Full Name (Last, First, Middle Initial)  
Ann H. Asbaty

Mailing Address 3 Huntington Dr

City State Zip Code  
Randolph NJ 07869

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

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

**Transaction ID:** 20100525-361-9-39

Amount of Each Receipt this Period  
19.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► **73.11**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 58  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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

**A.**

Full Name (Last, First, Middle Initial)  
William L. Atwell

Mailing Address 50 South 16 Street---Apt 4008

City Philadelphia State PA Zip Code 19102

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

Name of Employer CT GENERAL LIFE INSURANCE CO  
Occupation President International

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2112.00

Date of Receipt 05 / 13 / 2010  
**Transaction ID:** 20100514-11669-10-31  
Amount of Each Receipt this Period 192.00

**B.**

Full Name (Last, First, Middle Initial)  
William L. Atwell

Mailing Address 50 South 16 Street---Apt 4008

City Philadelphia State PA Zip Code 19102

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

Name of Employer CT GENERAL LIFE INSURANCE CO  
Occupation President International

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2112.00

Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-11650-9-39  
Amount of Each Receipt this Period 192.00

**C.**

Full Name (Last, First, Middle Initial)  
James Austin

Mailing Address 394 W Remington Dr

City Chandler State AZ Zip Code 85248

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

Name of Employer CIGNA HEALTHCARE OF AZ, INC  
Occupation General Surgeon

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 579.35

Date of Receipt 05 / 13 / 2010  
**Transaction ID:** 20100514-6446-10-31  
Amount of Each Receipt this Period 51.58

**SUBTOTAL** of Receipts This Page (optional) ..... ► 435.58

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 58  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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

**A.**

Full Name (Last, First, Middle Initial)  
James Austin

Mailing Address 394 W Remington Dr

City Chandler State AZ Zip Code 85248

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

Name of Employer CIGNA HEALTHCARE OF AZ, INC Occupation General Surgeon

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 579.35

Date of Receipt 05 / 27 / 2010

**Transaction ID:** 20100525-6442-9-39

Amount of Each Receipt this Period 56.44

**B.**

Full Name (Last, First, Middle Initial)  
Stephanie Bellamy

Mailing Address 7260 Wissahickon Avenue

City Philadelphia State PA Zip Code 19119

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

Name of Employer FIN Corp Development Occupation Financial Analysis Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 13 / 2010

**Transaction ID:** 20100514-3621-10-31

Amount of Each Receipt this Period 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephanie Bellamy

Mailing Address 7260 Wissahickon Avenue

City Philadelphia State PA Zip Code 19119

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

Name of Employer FIN Corp Development Occupation Financial Analysis Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 27 / 2010

**Transaction ID:** 20100525-3618-9-39

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 106.44

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kim Bimestefer	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 11 Colts Run Rd	<b>Transaction ID:</b> 20100514-10181-10-31
	City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kim Bimestefer	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 11 Colts Run Rd	<b>Transaction ID:</b> 20100525-10160-9-39
	City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul B. BORGESEN	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 7022 W Kimberly Way	<b>Transaction ID:</b> 20100514-7228-10-31
	City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 22.04
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 242.44	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>72.04</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul B. Borgesen		Date of Receipt MM / DD / YYYY 05 / 27 / 2010		
	Mailing Address 7022 W Kimberly Way		<b>Transaction ID:</b> 20100525-7224-9-39		
	City Glendale	State AZ	Zip Code 85308	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	Aggregate Year-to-Date 242.44		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Brett C. Browchuk		Date of Receipt MM / DD / YYYY 05 / 13 / 2010		
	Mailing Address 385 Deercliff Road		<b>Transaction ID:</b> 20100514-16585-10-31		
	City Avon	State CT	Zip Code 06001	Amount of Each Receipt this Period 96.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA Corporation	Occupation Svp Service Operations	Aggregate Year-to-Date 1056.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Brett C. Browchuk		Date of Receipt MM / DD / YYYY 05 / 27 / 2010		
	Mailing Address 385 Deercliff Road		<b>Transaction ID:</b> 20100525-16541-9-39		
	City Avon	State CT	Zip Code 06001	Amount of Each Receipt this Period 96.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA Corporation	Occupation Svp Service Operations	Aggregate Year-to-Date 1056.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>214.04</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 58  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
M. Buckley

Mailing Address 3651 N Leavitt St

City State Zip Code  
Chicago IL 60618

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Account Manager-National Accounts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
683.94

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-5244-10-31

Amount of Each Receipt this Period  
9.67

**B.**

Full Name (Last, First, Middle Initial)  
M. Buckley

Mailing Address 3651 N Leavitt St

City State Zip Code  
Chicago IL 60618

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Account Manager-National Accounts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
683.94

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-5244-9-39

Amount of Each Receipt this Period  
9.67

**C.**

Full Name (Last, First, Middle Initial)  
Timothy D. Buckley

Mailing Address 611 Shipton Lane

City State Zip Code  
Bryn Mawr PA 19010

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

Name of Employer  
CIGNA Internation

Occupation  
Vice President Bfo International

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
319.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-16235-10-31

Amount of Each Receipt this Period  
29.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **48.34**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 58
	<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**

<b>A.</b>	Full Name (Last, First, Middle Initial) Timothy D. Buckley	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 611 Shipton Lane	<b>Transaction ID:</b> 20100525-16192-9-39
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 29.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation CIGNA Internation Vice President Bfo International	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 319.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Rudolph C. Cane	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 4619 E White Aster St	<b>Transaction ID:</b> 20100525-3624-9-39
	City State Zip Code Phoenix AZ 85044	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.75	

<b>C.</b>	Full Name (Last, First, Middle Initial) William C. Carlson	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 70 Waterside Lane	<b>Transaction ID:</b> 20100514-802-10-31
	City State Zip Code West Hartford CT 06107	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Real Estate Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>73.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.**

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

Mailing Address 70 Waterside Lane

City State Zip Code  
West Hartford CT 06107

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Real Estate Senior Managing Director

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-801-9-39

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)  
Clement J. Cheng

Mailing Address 517 Wildflower Ln

City State Zip Code  
Media PA 19063

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

Name of Employer Occupation  
CIGNA CORPORATION Human Resources Senior Director

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-10004-9-39

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert F. Clark

Mailing Address 2 Reed Hill Rd

City State Zip Code  
Granby CT 06035

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Coli

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 990.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 1 0

Transaction ID: 20100514-429-10-31

Amount of Each Receipt this Period

90.00

**SUBTOTAL** of Receipts This Page (optional) .....

135.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 58  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
Robert F. Clark

Mailing Address 2 Reed Hill Rd

City State Zip Code  
Granby CT 06035

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Coli

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 990.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-428-9-39

Amount of Each Receipt this Period  
90.00

**B.**

Full Name (Last, First, Middle Initial)  
Jason G. Cooper

Mailing Address 313 Camden Branch Dr

City State Zip Code  
Cary NC 27518

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

Name of Employer Occupation  
CIGNA CORPORATION Clinical Program Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-24195-9-39

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
David M. Cordani

Mailing Address 32 Lucy Way

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO President and Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1705.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-524-10-31

Amount of Each Receipt this Period  
155.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **265.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 58  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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

**A.**

Full Name (Last, First, Middle Initial)  
David M. Cordani

Mailing Address 32 Lucy Way

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE President and Chief Executive Officer  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1705.00

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

**Transaction ID:** 20100525-523-9-39

Amount of Each Receipt this Period  
155.00

**B.**

Full Name (Last, First, Middle Initial)  
Henri R. Courmand

Mailing Address 28150 North Alma School Parkwa

City State Zip Code  
Scottsdale AZ 85262

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Strat and Business Develop Senior Dire  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

**Transaction ID:** 20100525-8188-9-39

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Christopher J. Coxon

Mailing Address 47 Leigh Gate Road

City State Zip Code  
Glastonbury CT 06033

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

Name of Employer Occupation  
CIGNA CORPORATION Senior Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

**Transaction ID:** 20100525-10675-9-39

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **195.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 58  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Stephen W. Crawford

Mailing Address 216 B Avenue

City State Zip Code  
Coronado CA 92118

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

Name of Employer Occupation  
CHC Lifesource Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-15907-9-39

Amount of Each Receipt this Period  
19.25

**B.** Full Name (Last, First, Middle Initial)  
Andrew D. Crooks

Mailing Address 323 Turtle Trl

City State Zip Code  
Lake Mary FL 32746

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Rvp Segment Lead  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-10016-10-31

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Andrew D. Crooks

Mailing Address 323 Turtle Trl

City State Zip Code  
Lake Mary FL 32746

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Rvp Segment Lead  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-9996-9-39

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 69.25

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
Donald M. Curry

Mailing Address 56 Harvard Ln

City State Zip Code  
Bedford NH 03110

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 27 / 2010

Transaction ID: 20100525-12115-9-39

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Johannes M. De Jong

Mailing Address 6122 Mccallum St

City State Zip Code  
Philadelphia PA 19144

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

Name of Employer  
CIGNA CORPORATION

Occupation  
Vice President Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2010

Transaction ID: 20100514-257-10-31

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
Johannes M. De Jong

Mailing Address 6122 Mccallum St

City State Zip Code  
Philadelphia PA 19144

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

Name of Employer  
CIGNA CORPORATION

Occupation  
Vice President Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 27 / 2010

Transaction ID: 20100525-256-9-39

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Edwin J. Detrick	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 17 Swallow Rd	<b>Transaction ID:</b> 20100525-2940-9-39
	City State Zip Code Holland PA 18966	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Vice President Investor Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeannine Doherty	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 1901 E Royal Palm Rd	<b>Transaction ID:</b> 20100514-32-10-31
	City State Zip Code Phoenix AZ 85020	Amount of Each Receipt this Period 12.03
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.39	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeannine Doherty	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 1901 E Royal Palm Rd	<b>Transaction ID:</b> 20100525-32-9-39
	City State Zip Code Phoenix AZ 85020	Amount of Each Receipt this Period 17.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.39	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	49.22
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Beverly J. Everett	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 8228 Academy Rd	<b>Transaction ID:</b> 20100525-116-9-39
	City State Zip Code Ellicott City MD 21043	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INT'L REHAB. ASSOCIATES, INC. Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Staci F. Fernandez	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 15 Dilaj Dr	<b>Transaction ID:</b> 20100525-2160-9-39
	City State Zip Code Columbia CT 06237	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Business Project Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Scott M. Filiault	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 135 Timrod Rd	<b>Transaction ID:</b> 20100525-266-9-39
	City State Zip Code Manchester CT 06040	Amount of Each Receipt this Period 20.00
	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 ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 58  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

**A.**

Full Name (Last, First, Middle Initial)  
Richard H. Forde

Mailing Address 5 Brighton Ln

City State Zip Code  
Simsbury CT 06070

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Svp Chief Investment Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
990.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-1012-10-31

Amount of Each Receipt this Period  
90.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard H. Forde

Mailing Address 5 Brighton Ln

City State Zip Code  
Simsbury CT 06070

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Svp Chief Investment Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
990.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-1011-9-39

Amount of Each Receipt this Period  
90.00

**C.**

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

Mailing Address 1004 Beech Bay Rd

City State Zip Code  
Poplar Grove IL 61065

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Sales Director-Sales Mgt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-3321-9-39

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **200.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 58  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.**

Full Name (Last, First, Middle Initial) Thomas Garvey		Date of Receipt MM / DD / YYYY 05 / 27 / 2010
Mailing Address 31 Lakeshore Dr		<b>Transaction ID:</b> 20100525-2330-9-39
City Rockaway	State NJ	Zip Code 07866
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 19.25
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 ▼ 211.75	

**B.**

Full Name (Last, First, Middle Initial) David J. Giannoni		Date of Receipt MM / DD / YYYY 05 / 13 / 2010
Mailing Address 2030 James Farm Rd		<b>Transaction ID:</b> 20100514-4702-10-31
City Stratford	State CT	Zip Code 06614
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 6.79
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 ▼ 413.34	

**C.**

Full Name (Last, First, Middle Initial) David J. Giannoni		Date of Receipt MM / DD / YYYY 05 / 27 / 2010
Mailing Address 2030 James Farm Rd		<b>Transaction ID:</b> 20100525-4701-9-39
City Stratford	State CT	Zip Code 06614
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 28.70
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 ▼ 413.34	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>54.74</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 58
	<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) Paul J. Gontarek		Date of Receipt MM / DD / YYYY 05 / 13 / 2010
Mailing Address 7442 Devon St		<b>Transaction ID:</b> 20100514-3452-10-31
City Philadelphia	State PA	Zip Code 19119
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer CIGNA CORPORATION	Occupation Association Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

**B.**

Full Name (Last, First, Middle Initial) Paul J. Gontarek		Date of Receipt MM / DD / YYYY 05 / 27 / 2010
Mailing Address 7442 Devon St		<b>Transaction ID:</b> 20100525-3449-9-39
City Philadelphia	State PA	Zip Code 19119
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer CIGNA CORPORATION	Occupation Association Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

**C.**

Full Name (Last, First, Middle Initial) Richard Gray		Date of Receipt MM / DD / YYYY 05 / 13 / 2010
Mailing Address 138 Ballard Dr		<b>Transaction ID:</b> 20100514-2236-10-31
City West Hartford	State CT	Zip Code 06119
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer CIGNA CORPORATION	Occupation Strat and Business Develop Senior Dire	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 23 / 58  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Richard Gray

Mailing Address 138 Ballard Dr

City State Zip Code  
West Hartford CT 06119

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

Name of Employer Occupation  
CIGNA CORPORATION Strat and Business Develop Senior Dire

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-2235-9-39

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Douglas R. Hadley

Mailing Address 126 Hopmeadow Street

City State Zip Code  
Weatogue CT 06089

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

Name of Employer Occupation  
INT'L REHAB. ASSOCIATES, INC. Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-7625-10-31

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Douglas R. Hadley

Mailing Address 126 Hopmeadow Street

City State Zip Code  
Weatogue CT 06089

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

Name of Employer Occupation  
INT'L REHAB. ASSOCIATES, INC. Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-7616-9-39

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 75.00

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 58
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph L. Hannah		Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 9414 Indianfield DV		<b>Transaction ID:</b> 20100525-6220-9-39
	City Mechanicsville	State VA	Zip Code 23116
	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 Senior Sales Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Anthony Hipp		Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 11459 Coach Dr		<b>Transaction ID:</b> 20100525-15400-9-39
	City Mokena	State IL	Zip Code 60448
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.25
	Name of Employer CIGNA CORPORATION	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.75	

<b>C.</b>	Full Name (Last, First, Middle Initial) G. Hoagland		Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 10012 Rough Run Court		<b>Transaction ID:</b> 20100514-16537-10-31
	City Fairfax	State VA	Zip Code 22039
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
	Name of Employer L&PA CIGNA-General Counsel	Occupation Vice President Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 770.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	109.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 58
	(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) G. Hoagland		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 1 0
Mailing Address 10012 Rough Run Court		<b>Transaction ID:</b> 20100525-16493-9-39
City	State	Zip Code
Fairfax	VA	22039
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 70.00
Name of Employer L&PA CIGNA-General Counsel	Occupation Vice President Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

**B.**

Full Name (Last, First, Middle Initial) Robert P. Hockmuth		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 1 0
Mailing Address 135 Brackett Rd		<b>Transaction ID:</b> 20100525-868-9-39
City	State	Zip Code
Rye	NH	03870
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 19.24
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 ▼ 211.64	

**C.**

Full Name (Last, First, Middle Initial) Tamara Horwitz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 1 0
Mailing Address 3430 List Place		<b>Transaction ID:</b> 20100525-21590-9-39
City	State	Zip Code
Minneapolis	MN	55416
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer CIGNA Corp.	Occupation Account Manager-National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	109.24
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 58  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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

**A.**

Full Name (Last, First, Middle Initial)  
Dale Hovey

Mailing Address 6 Westborough Dr

City State Zip Code  
Weatogue CT 06089

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO App Development Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-1055-9-39

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Alan Innes

Mailing Address 19 Harvest Hill Rd

City State Zip Code  
West Simsbury CT 06092

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

Name of Employer Occupation  
CIGNA CORPORATION Senior Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-1986-9-39

Amount of Each Receipt this Period  
19.25

**C.**

Full Name (Last, First, Middle Initial)  
Abdul-Alim Issa

Mailing Address 5 Corvette Ct

City State Zip Code  
New Castle DE 19720

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AMERICA Underwriting Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-136-10-31

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **64.25**

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Abdul-Alim Issa		Date of Receipt MM / DD / YYYY 05 / 27 / 2010		
	Mailing Address 5 Corvette Ct		<b>Transaction ID:</b> 20100525-136-9-39		
	City New Castle	State DE	Zip Code 19720	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Underwriting Director	Aggregate Year-to-Date 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) William S. Jameson		Date of Receipt MM / DD / YYYY 05 / 13 / 2010		
	Mailing Address 690 Bradford St		<b>Transaction ID:</b> 20100514-7806-10-31		
	City Pasadena	State CA	Zip Code 91105	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 Association Chief Counsel	Aggregate Year-to-Date 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) William S. Jameson		Date of Receipt MM / DD / YYYY 05 / 27 / 2010		
	Mailing Address 690 Bradford St		<b>Transaction ID:</b> 20100525-7795-9-39		
	City Pasadena	State CA	Zip Code 91105	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 Association Chief Counsel	Aggregate Year-to-Date 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 58  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

**A.**

Full Name (Last, First, Middle Initial)  
Scott Josephs

Mailing Address 403 Tramore Dr

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-8461-10-31

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Scott Josephs

Mailing Address 403 Tramore Dr

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-8449-9-39

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey L. Kang

Mailing Address 245 North Main Street

City State Zip Code  
Wallingford CT 06492

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Vice President Chief Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-11303-10-31

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey L. Kang	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 245 North Main Street	<b>Transaction ID:</b> 20100525-11283-9-39
	City Wallingford State CT Zip Code 06492	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: Vice President Chief Medical Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Benjamin W. Katz	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 3603a Happy Valley Rd	<b>Transaction ID:</b> 20100514-7985-10-31
	City Lafayette State CA Zip Code 94549	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: CIGNA HEALTHCARE OF CA, INC. Occupation: Provider Contracting Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Benjamin W. Katz	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 3603a Happy Valley Rd	<b>Transaction ID:</b> 20100525-7974-9-39
	City Lafayette State CA Zip Code 94549	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: CIGNA HEALTHCARE OF CA, INC. Occupation: Provider Contracting Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 30 / 58  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Brian S. Keefer

Mailing Address 816 Nathan Hale Drive

City State Zip Code  
West Chester PA 19382

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

Name of Employer Occupation  
CIGNA CORPORATION Communications Director li

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-18596-9-39

Amount of Each Receipt this Period  
19.25

**B.** Full Name (Last, First, Middle Initial)  
Kay L. Kretsch

Mailing Address 221 Lone Oak Village Way

City State Zip Code  
Nashville TN 37215

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

Name of Employer Occupation  
CHC Government Services Operations Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-14813-9-39

Amount of Each Receipt this Period  
20.00

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

Mailing Address 509 S Bay Shore Blvd

City State Zip Code  
Gilbert AZ 85233

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

Name of Employer Occupation  
CIGNA HEALTHCARE OF AZ, INC Family Practice

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-2150-9-39

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 59.25

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

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

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

FOR LINE NUMBER: PAGE 31 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
Christopher R. Loomis

Mailing Address 909 Overton Ave

City State Zip Code  
Yardley PA 19067

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

Name of Employer Occupation  
CIGNA CORPORATION Association Chief Counsel

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-5363-9-39

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Carla C. Mangiafico

Mailing Address 47 Kelsey Ln

City State Zip Code  
Glastonbury CT 06033

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Financial Analysis Senior Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 209.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-291-9-39

Amount of Each Receipt this Period

19.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark P. Marsters

Mailing Address 13 Devonshire Ln

City State Zip Code  
Malvern PA 19355

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AMERICA Vice President Service Operations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 1 0

Transaction ID: 20100514-12371-10-31

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

89.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 58  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

**A.**

Full Name (Last, First, Middle Initial)  
Mark P. Marsters

Mailing Address 13 Devonshire Ln

City Malvern State PA Zip Code 19355

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

Name of Employer LIFE INS. CO. OF NORTH AMERICA  
Occupation Vice President Service Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-12350-9-39

Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas J. Martel

Mailing Address 23 Tack Ct

City Edgewater State MD Zip Code 21037

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

Name of Employer CT GENERAL LIFE INSURANCE CO  
Occupation General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 13 / 2010  
**Transaction ID:** 20100514-11980-10-31

Amount of Each Receipt this Period 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas J. Martel

Mailing Address 23 Tack Ct

City Edgewater State MD Zip Code 21037

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

Name of Employer CT GENERAL LIFE INSURANCE CO  
Occupation General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-11961-9-39

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
Kymberly P. Miranda

Mailing Address 520 SE 5th Avenue

City State Zip Code  
Ft. Lauderdale FL 33301

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Account Manager-National Accounts  
CO

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-5403-9-39

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
John M. Murabito

Mailing Address 105 Mill View Ln

City State Zip Code  
Newtown Square PA 19073

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

Name of Employer Occupation  
CIGNA CORPORATION E.V.P. Human Resources & Services

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 1 0

Transaction ID: 20100514-12739-10-31

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
John M. Murabito

Mailing Address 105 Mill View Ln

City State Zip Code  
Newtown Square PA 19073

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

Name of Employer Occupation  
CIGNA CORPORATION E.V.P. Human Resources & Services

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-12716-9-39

Amount of Each Receipt this Period

100.00

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

220.00

**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel Nicoll	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 4 Bayview Dr	<b>Transaction ID:</b> 20100514-2282-10-31
	City State Zip Code Plainview NY 11803	Amount of Each Receipt this Period 26.93
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 296.23	

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Nicoll	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 4 Bayview Dr	<b>Transaction ID:</b> 20100525-2281-9-39
	City State Zip Code Plainview NY 11803	Amount of Each Receipt this Period 26.93
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 296.23	

<b>C.</b>	Full Name (Last, First, Middle Initial) John Oates	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 2101 Sea Eagle View	<b>Transaction ID:</b> 20100514-15914-10-31
	City State Zip Code Austin TX 78738	Amount of Each Receipt this Period 46.15
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 507.65	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>100.01</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 58
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Oates		Date of Receipt
	Mailing Address 2101 Sea Eagle View		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Austin	TX	78738
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CIGNA CORPORATION		Occupation Government Affairs Director	<b>Transaction ID:</b> 20100525-15872-9-39
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="507.65"/>	<input type="text" value="46.15"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffery P. Panter		Date of Receipt
	Mailing Address 1947 Turnberry Cir		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Hixson	TN	37343
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Claims Senior Director	<b>Transaction ID:</b> 20100525-5761-9-39
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="211.75"/>	<input type="text" value="19.25"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Charlene Parsons		Date of Receipt
	Mailing Address 1179 Colts Ln		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CIGNA CORPORATION		Occupation Vice President Talent Optimization	<b>Transaction ID:</b> 20100514-13214-10-31
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="990.00"/>	<input type="text" value="90.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="155.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 58
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Charlene Parsons		Date of Receipt
	Mailing Address 1179 Colts Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100525-13190-9-39
Name of Employer CIGNA CORPORATION		Occupation Vice President Talent Optimization	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 90.00
		<input type="text"/> 990.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark A. Parsons		Date of Receipt
	Mailing Address 4 Thistle Hollow		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Avon	CT	06001
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100514-511-10-31
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Svp Reinsurance	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 40.00
		<input type="text"/> 440.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mark A. Parsons		Date of Receipt
	Mailing Address 4 Thistle Hollow		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Avon	CT	06001
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100525-510-9-39
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Svp Reinsurance	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 40.00
		<input type="text"/> 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 170.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 58  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

**A.**

Full Name (Last, First, Middle Initial)  
Carol Petren

Mailing Address 210 W. Washington Square -10SW

City Philadelphia State PA Zip Code 19106-3581

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

Name of Employer ADM CEO Staff Occupation E.V.P. Genl Counsel & Pub Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2112.00

Date of Receipt 05 / 13 / 2010  
**Transaction ID:** 20100514-15464-10-31  
 Amount of Each Receipt this Period 192.00

**B.**

Full Name (Last, First, Middle Initial)  
Carol Petren

Mailing Address 210 W. Washington Square -10SW

City Philadelphia State PA Zip Code 19106-3581

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

Name of Employer ADM CEO Staff Occupation E.V.P. Genl Counsel & Pub Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2112.00

Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-15429-9-39  
 Amount of Each Receipt this Period 192.00

**C.**

Full Name (Last, First, Middle Initial)  
Carole A. Pirozzi

Mailing Address 4651 Maryann Ln

City Bethlehem State PA Zip Code 18017

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Human Resources Senior Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-2800-9-39  
 Amount of Each Receipt this Period 19.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► **403.25**

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

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

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

FOR LINE NUMBER: PAGE 38 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
Charles C. Pitts

Mailing Address 622 Museum Drive

City State Zip Code  
Charlotte NC 28207

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

Name of Employer Occupation  
CHC Middle Market Segment General Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 211.53

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-16150-9-39

Amount of Each Receipt this Period

19.23

**B.**

Full Name (Last, First, Middle Initial)  
David M. Porcello

Mailing Address 24 Magnolia Dr

City State Zip Code  
Suffield CT 06078

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Tax

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-1463-9-39

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas F. Prevost

Mailing Address 13 Deer Run

City State Zip Code  
Southwick MA 01077

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Aviation Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-362-9-39

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

59.23

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jodi Prohofsky		Date of Receipt
	Mailing Address 360 W Point Rd		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tonka Bay	MN	55331
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100514-2001-10-31
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.		Occupation General Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	<input type="text" value="25.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Jodi Prohofsky		Date of Receipt
	Mailing Address 360 W Point Rd		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tonka Bay	MN	55331
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100525-2001-9-39
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.		Occupation General Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	<input type="text" value="25.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Edward Rainis		Date of Receipt
	Mailing Address 3 Rebecca Court		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Hockessin	DE	19707
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100525-11125-9-39
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation App Development Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="211.75"/>	<input type="text" value="19.25"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="69.25"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 58  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

**A.** Full Name (Last, First, Middle Initial)  
Michael J. Raybeck

Mailing Address 622 Georgia Ave # 307

City State Zip Code  
Chattanooga TN 37402

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

Name of Employer: INT'L REHAB. ASSOCIATES, INC.  
Occupation: Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.75

Date of Receipt: 05 / 27 / 2010  
Transaction ID: 20100525-13117-9-39  
Amount of Each Receipt this Period: 19.25

**B.** Full Name (Last, First, Middle Initial)  
William J. Reedy

Mailing Address 1539 E Hackamore St

City State Zip Code  
Mesa AZ 85203

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

Name of Employer: CIGNA HEALTHCARE OF AZ, INC.  
Occupation: Urgent Care Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt: 05 / 27 / 2010  
Transaction ID: 20100525-7006-9-39  
Amount of Each Receipt this Period: 20.00

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

Mailing Address 3 Scarborough Farms Rd

City State Zip Code  
Simsbury CT 06070

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

Name of Employer: CT GENERAL LIFE INSURANCE CO  
Occupation: Vice President United States Products

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt: 05 / 13 / 2010  
Transaction ID: 20100514-729-10-31  
Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **64.25**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 58  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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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 Farms Rd

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Vice President United States Products

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-728-9-39

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael J. Ross

Mailing Address 147 Old Gulph Rd

City State Zip Code  
Wynnewood PA 19096

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AMERICA Vice President Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1056.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-11512-10-31

Amount of Each Receipt this Period  
96.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael J. Ross

Mailing Address 147 Old Gulph Rd

City State Zip Code  
Wynnewood PA 19096

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AMERICA Vice President Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1056.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-11493-9-39

Amount of Each Receipt this Period  
96.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **217.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jean C. Rush	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 73 Cidermill Hts	<b>Transaction ID:</b> 20100525-269-9-39
	City State Zip Code North Granby CT 06060	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 211.75	

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard B. Salmon	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 5 Hawks Rdg	<b>Transaction ID:</b> 20100514-2165-10-31
	City State Zip Code Avon CT 06001	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard B. Salmon	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 5 Hawks Rdg	<b>Transaction ID:</b> 20100525-2164-9-39
	City State Zip Code Avon CT 06001	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	79.25
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) David N. Sasportas		Date of Receipt
	Mailing Address 125 Wadhams Rd		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Bloomfield	CT	06002
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100525-444-9-39
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Project Management Senior Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	<input type="text" value="20.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Sataline		Date of Receipt
	Mailing Address 18 Wyndham Ln		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Farmington	CT	06032
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100514-512-10-31
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Vice President Senior Managing Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="935.00"/>	<input type="text" value="85.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank Sataline		Date of Receipt
	Mailing Address 18 Wyndham Ln		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Farmington	CT	06032
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100525-511-9-39
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Vice President Senior Managing Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="935.00"/>	<input type="text" value="85.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="190.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 44 / 58  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
David A. Savino

Mailing Address 91 Trumbull Ln

City State Zip Code  
South Windsor CT 06074

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

Name of Employer Occupation  
CIGNA CORPORATION Compliance Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-686-10-31

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
David A. Savino

Mailing Address 91 Trumbull Ln

City State Zip Code  
South Windsor CT 06074

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

Name of Employer Occupation  
CIGNA CORPORATION Compliance Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-685-9-39

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
David S. Scheibe

Mailing Address 400 Kings Highway

City State Zip Code  
Moorestown NJ 08057

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AMERICA Treasury Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-1544-9-39

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 70.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 58
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard J. Shube		Date of Receipt
	Mailing Address 1975 E. Belleview Ln.		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Greenwood Village	CO	80121
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100525-17213-9-39
Name of Employer CGI Sales		Occupation Sales Director-Direct Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="211.75"/>	<input type="text" value="19.25"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael D. Slice		Date of Receipt
	Mailing Address 19422 N 73rd Ave		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Glendale	AZ	85308
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100525-4267-9-39
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation Operations Senior Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="211.75"/>	<input type="text" value="19.25"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) William J. Smith		Date of Receipt
	Mailing Address 269 Sunnybrook Rd		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Springfield	PA	19064
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20100514-8743-10-31
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation Business Financial Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="550.00"/>	<input type="text" value="50.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="88.50"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 46 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
William J. Smith

Mailing Address 269 Sunnybrook Rd

City State Zip Code  
Springfield PA 19064

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AM- Business Financial Officer  
ERICA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-8731-9-39

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Raymond Smithberger

Mailing Address 6 Saint Andrews Dr

City State Zip Code  
Avon CT 06001

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Operations Senior Director  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-12625-9-39

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
John Sorrow

Mailing Address 507 Lindsay Court

City State Zip Code  
Chattanooga TN 37403

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) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 1 0

Transaction ID: 20100525-5973-9-39

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 58  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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 Dr

City State Zip Code  
Glendale AZ 85308

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

Name of Employer Occupation  
CIGNA HEALTHCARE OF AZ, INC Family Practice

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-7063-9-39

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Kenneth Stapleton

Mailing Address 454 Lonesome Dove Lane

City State Zip Code  
Ringgold GA 30736

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Human Resources Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-12749-9-39

Amount of Each Receipt this Period  
19.25

**C.** Full Name (Last, First, Middle Initial)  
Jennifer Stepp

Mailing Address 4144 Central Ave

City State Zip Code  
Indianapolis IN 46205

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 ▼ 318.01

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-4786-10-31

Amount of Each Receipt this Period  
35.61

**SUBTOTAL** of Receipts This Page (optional) ..... ► **74.86**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 58  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Jennifer Stepp

Mailing Address 4144 Central Ave

City Indianapolis State IN Zip Code 46205

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 ▼ 318.01

Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-4785-9-39  
 Amount of Each Receipt this Period 32.81

**B.** Full Name (Last, First, Middle Initial)  
Cathrin Stickney

Mailing Address 1050 Hyatt Road E

City Southold State NY Zip Code 11971

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

Name of Employer CT GENERAL LIFE INSURANCE CO  
Occupation Operations Senior Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-8861-9-39  
 Amount of Each Receipt this Period 19.25

**C.** Full Name (Last, First, Middle Initial)  
Gregory J. Sullivan

Mailing Address 27 Sunny Heights Rd

City Granby State CT Zip Code 06035

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

Name of Employer CT GENERAL LIFE INSURANCE CO  
Occupation Operations Senior Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-13429-9-39  
 Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 72.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeff S. Terrill	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 9556 E Cortez St	<b>Transaction ID:</b> 20100525-9468-9-39
	City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Rvp Segment Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffrey Thackeray	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 1334 Holly Hill Drive	<b>Transaction ID:</b> 20100514-229-10-31
	City State Zip Code Franklin TN 37064	Amount of Each Receipt this Period 9.19
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Manager Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 347.26	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeffrey Thackeray	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 1334 Holly Hill Drive	<b>Transaction ID:</b> 20100525-229-9-39
	City State Zip Code Franklin TN 37064	Amount of Each Receipt this Period 9.19
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Manager Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 347.26	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>38.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 58
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey E. Tindall	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 47 Owens Brook Blvd	<b>Transaction ID:</b> 20100525-13695-9-39
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Katharine L. Wade	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 3 East Weatogue Strret	<b>Transaction ID:</b> 20100525-791-9-39
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Compliance Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Brian Wallach	Date of Receipt MM / DD / YYYY 05 / 13 / 2010
	Mailing Address 1409 Vassar St	<b>Transaction ID:</b> 20100514-8767-10-31
	City State Zip Code Houston TX 77006	Amount of Each Receipt this Period 29.93
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 329.23	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	69.93
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 51 / 58  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 1409 Vassar St

City State Zip Code  
Houston TX 77006

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Provider Contracting Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 329.23

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-8754-9-39

Amount of Each Receipt this Period  
29.93

**B.** Full Name (Last, First, Middle Initial)  
Joseph M. Walter

Mailing Address 510 Larkins Bridge Dr

City State Zip Code  
Downingtown PA 19335

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

Name of Employer Occupation  
CIGNA CORPORATION Financial Analysis Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** 20100525-10733-9-39

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Scott D. Watson

Mailing Address 1813 Shadywood Ct

City State Zip Code  
Chesterfield MO 63017

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AMERICA Senior Account Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 351.45

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** 20100514-5200-10-31

Amount of Each Receipt this Period  
20.09

**SUBTOTAL** of Receipts This Page (optional) ..... ► 70.02

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

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

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

FOR LINE NUMBER: PAGE 52 / 58  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Scott D. Watson  
 Mailing Address 1813 Shadywood Ct  
 City Chesterfield State MO Zip Code 63017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Senior Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 351.45  
 Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-5200-9-39  
 Amount of Each Receipt this Period 16.46

**B.** Full Name (Last, First, Middle Initial)  
Christopher J. Whelan  
 Mailing Address 585 Country Club Rd  
 City Avon State CT Zip Code 06001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Financial Analysis Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00  
 Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-13167-9-39  
 Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Richard M. White  
 Mailing Address 68 Longwood Dr  
 City Portland State ME Zip Code 04102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Provider Contracting Director  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00  
 Date of Receipt 05 / 27 / 2010  
**Transaction ID:** 20100525-2134-9-39  
 Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 56.46  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 58  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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

**A.**

Full Name (Last, First, Middle Initial) Lance Wilkes		Date of Receipt MM / DD / YYYY 05 / 27 / 2010
Mailing Address 21 Arlington Drive		<b>Transaction ID:</b> 20100525-9740-9-39
City Avon	State CT	Zip Code 06001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Financial Strategy Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

**B.**

Full Name (Last, First, Middle Initial) Bu Yang		Date of Receipt MM / DD / YYYY 05 / 13 / 2010
Mailing Address 121 High Wood Dr		<b>Transaction ID:</b> 20100514-9449-10-31
City South Glastonbury	State CT	Zip Code 06073
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 21.15
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Architecture Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.65	

**C.**

Full Name (Last, First, Middle Initial) Bu Yang		Date of Receipt MM / DD / YYYY 05 / 27 / 2010
Mailing Address 121 High Wood Dr		<b>Transaction ID:</b> 20100525-9435-9-39
City South Glastonbury	State CT	Zip Code 06073
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 21.15
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Architecture Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.65	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>62.30</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 54 / 58	
	(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"/> 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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Young		Date of Receipt		
	Mailing Address 18420 29th Avenue North		M M / D D / Y Y Y Y 05 / 27 / 2010		
	City Plymouth	State MN	Zip Code 55447	<b>Transaction ID:</b> 20100525-15170-9-39	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00		
	Name of Employer CHC Middle Market Sales	Occupation Account Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	20.00
<b>TOTAL</b> This Period (last page this line number only) .....	5667.15

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<b>A.</b> Full Name (Last, First, Middle Initial) Dan Coats for Indiana <hr/> Mailing Address PO Box 301141 <hr/> City Indianapolis State IN Zip Code 46230 <hr/> Purpose of Disbursement 2010 General Candidate Name Daniel R. Coats <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 6324A0111E1EA1B9D3E Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ellsworth for Indiana <hr/> Mailing Address PO Box 62 <hr/> City Evansville State IN Zip Code 47701 <hr/> Purpose of Disbursement 2010 General Candidate Name Brad Ellsworth <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70142645FD3FF74D76A Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Roy Blunt <hr/> Mailing Address PO Box 50100 PO Box 50100 <hr/> City Springfield State MO Zip Code 65805 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Roy D. Blunt <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 345209DC4CF176221AE Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5500.00

**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)

PAGE 56 / 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<b>A.</b> Full Name (Last, First, Middle Initial) Hatch Election Committee Inc <hr/> Mailing Address 175 South West Temple Suite 650 <hr/> City Salt Lake City State UT Zip Code 84101 <hr/> Purpose of Disbursement 2012 General Candidate Name Orrin G. Hatch <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: <hr/> Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 073FBC1DF1D40F3581E Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Kirk for Senate <hr/> Mailing Address PO Box 8 <hr/> City Winnetka State IL Zip Code 60093 <hr/> Purpose of Disbursement 2010 General Candidate Name Mark Steven Kirk <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4F2024BF470E3690D3B Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2010
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Lance for Congress <hr/> Mailing Address PO Box 225 <hr/> City Colonia State NJ Zip Code 07067 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Leonard Lance <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 46FB026AE27C95476B3 Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4500.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<b>A.</b> Full Name (Last, First, Middle Initial) Lincoln Davis for Congress <hr/> Mailing Address PO Box 350 <hr/> City Jamestown State TN Zip Code 38556 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Lincoln Davis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1FA0F64B139D95D6ABC Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) New Hampshire Democratic Party <hr/> Mailing Address 105 North State Street <hr/> City Concord State NH Zip Code 03301 <hr/> Purpose of Disbursement 2010 Contribution Candidate Name New Hampshire Democratic Party <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: F80CD400B225936A741 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Burr Committee, The <hr/> Mailing Address Post Office Box 5928 <hr/> City Winston-Salem State NC Zip Code 27113 <hr/> Purpose of Disbursement 2010 General Candidate Name Richard M. Burr <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E4A6296C335F273DF3D Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

8500.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Spratt for Congress Committee</p> <p>Mailing Address PO Box 830</p> <p>City York State SC Zip Code 29745</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name John M. Spratt, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SC District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 139D22C3700895A7C0D</p> <p>Date of Disbursement 05 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Spratt for Congress Committee</p> <p>Mailing Address PO Box 830</p> <p>City York State SC Zip Code 29745</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name John M. Spratt, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SC District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 55676EC1FF877C14844</p> <p>Date of Disbursement 05 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Wyden for Senate</p> <p>Mailing Address 232 NE 9th Avenue</p> <p>City Portland State OR Zip Code 97232</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Ron Wyden</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OR District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 52113E423C3FA1B7CAE</p> <p>Date of Disbursement 05 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5000.00

**TOTAL** This Period (last page this line number only) ..... ▶

23500.00