

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
CIGNA Corporation Political Action Committee

ADDRESS (number and street) Two Liberty Place
1601 Chestnut St-TL16B
 Check if different than previously reported. (ACC)
Philadelphia PA 19192

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

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 10 01 2009 through 10 31 2009

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 Thomas A. McCarthy

Signature of Treasurer Electronically Filed by Thomas A. McCarthy Date 11 19 2009

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
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	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>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		23497.58
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	39842.31									
(c) Total Receipts (from Line 19)	21339.98	164204.71								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	61182.29	187702.29								
7. Total Disbursements (from Line 31)	3500.00	130020.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57682.29	57682.29								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
CIGNA Corporation Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	13679.32	67249.27
(ii) Unitemized	7660.66	96955.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)	21339.98	164204.71
(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)	21339.98	164204.71
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	21339.98	164204.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21339.98	164204.71

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	2570.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	2570.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	126500.00
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	20.00
(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	20.00
29. Other Disbursements.....	1000.00	930.00
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))..	3500.00	130020.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3500.00	130020.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 199

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)	21339.98	164204.71
34. Total Contribution Refunds (from Line 28(d))	0.00	20.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21339.98	164184.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	2570.00
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	2570.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 199
(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)
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 ▼ 592.46

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: 20090929-14985-11-3

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 ▼ 592.46

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-14925-11-47

Amount of Each Receipt this Period
26.93

C.

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 ▼ 592.46

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: 20091027-14898-12-36

Amount of Each Receipt this Period
26.93

SUBTOTAL of Receipts This Page (optional) ► **80.79**

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 7 / 199
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Rebecca Allison		Date of Receipt
	Mailing Address 10636 N 11th St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9
	City	State	Zip Code
	Phoenix	AZ	85020
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-6516-11-47
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation Cardiologist (Invasive)	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 ▼ 220.00	<input type="text"/> 10.00

B.	Full Name (Last, First, Middle Initial) Rebecca Allison		Date of Receipt
	Mailing Address 10636 N 11th St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Phoenix	AZ	85020
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091027-6509-12-36
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation Cardiologist (Invasive)	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 ▼ 220.00	<input type="text"/> 10.00

C.	Full Name (Last, First, Middle Initial) Ann H. Asbaty		Date of Receipt
	Mailing Address 3 Huntington Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 0 1 / 2 0 0 9
	City	State	Zip Code
	Randolph	NJ	07869
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090929-367-11-3
Name of Employer CT GENERAL LIFE INSURANCE CO		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 ▼ 423.50	<input type="text"/> 19.25

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 39.25
TOTAL 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: (check only one)	PAGE 8 / 199
	<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) Ann H. Asbaty	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 3 Huntington Dr	Transaction ID: 20091013-366-11-47
	City State Zip Code Randolph NJ 07869	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.50	

B.	Full Name (Last, First, Middle Initial) Ann H. Asbaty	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 3 Huntington Dr	Transaction ID: 20091027-366-12-36
	City State Zip Code Randolph NJ 07869	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.50	

C.	Full Name (Last, First, Middle Initial) Jacquelyn A. Aube	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 166 Wildflower Cir	Transaction ID: 20091013-2026-11-47
	City State Zip Code Westfield MA 01085	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Senior Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	48.50
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 199
(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)
Jacquelyn A. Aube

Mailing Address 166 Wildflower Cir

City State Zip Code
Westfield MA 01085

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-2023-12-36

Amount of Each Receipt this Period
10.00

B.

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

Mailing Address 394 W Remington Dr

City State Zip Code
Chandler AZ 85248

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1152.04

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

Transaction ID: 20090929-6652-11-3

Amount of Each Receipt this Period
50.86

C.

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

Mailing Address 394 W Remington Dr

City State Zip Code
Chandler AZ 85248

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1152.04

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-6629-11-47

Amount of Each Receipt this Period
50.86

SUBTOTAL of Receipts This Page (optional) ► **111.72**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 199
(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		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 394 W Remington Dr		Transaction ID: 20091027-6621-12-36
City Chandler	State AZ	Zip Code 85248
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.86
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation General Surgeon	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1152.04	

B.

Full Name (Last, First, Middle Initial) Thomas C. Banet		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 10558 Fox Forest Dr		Transaction ID: 20091013-4920-11-47
City Great Falls	State VA	Zip Code 22066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Senior Sales Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.

Full Name (Last, First, Middle Initial) Thomas C. Banet		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 10558 Fox Forest Dr		Transaction ID: 20091027-4914-12-36
City Great Falls	State VA	Zip Code 22066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Senior Sales Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	70.86
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 11 / 199
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
W. Barksdale

Mailing Address 2632 Lovejoy Cir

City State Zip Code
Duluth GA 30097

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

Name of Employer CHC Contracting and Network De
Occupation Provider Contracting Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1870.00

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

Transaction ID: 20090929-15074-11-3

Amount of Each Receipt this Period
85.00

B.

Full Name (Last, First, Middle Initial)
W. Barksdale

Mailing Address 2632 Lovejoy Cir

City State Zip Code
Duluth GA 30097

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

Name of Employer CHC Contracting and Network De
Occupation Provider Contracting Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1870.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-15013-11-47

Amount of Each Receipt this Period
85.00

C.

Full Name (Last, First, Middle Initial)
W. Barksdale

Mailing Address 2632 Lovejoy Cir

City State Zip Code
Duluth GA 30097

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

Name of Employer CHC Contracting and Network De
Occupation Provider Contracting Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1870.00

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

Transaction ID: 20091027-14985-12-36

Amount of Each Receipt this Period
85.00

SUBTOTAL of Receipts This Page (optional) ► **255.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 199
	<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) Rosemary B. Bartley		Date of Receipt
	Mailing Address Po Box 9153		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	North Saint Paul	MN	55109
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.		Occupation Business Project Senior Spec	Transaction ID: 20090929-7290-11-3
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="330.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="15.00"/>

B.	Full Name (Last, First, Middle Initial) Rosemary B. Bartley		Date of Receipt
	Mailing Address Po Box 9153		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	North Saint Paul	MN	55109
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.		Occupation Business Project Senior Spec	Transaction ID: 20091013-7267-11-47
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="330.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="15.00"/>

C.	Full Name (Last, First, Middle Initial) Rosemary B. Bartley		Date of Receipt
	Mailing Address Po Box 9153		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	North Saint Paul	MN	55109
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.		Occupation Business Project Senior Spec	Transaction ID: 20091027-7259-12-36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="330.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="15.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="45.00"/>
TOTAL 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: (check only one)	PAGE 13 / 199
	<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) Stephanie Bellamy		Date of Receipt
	Mailing Address 7260 Wissahickon Avenue		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19119
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090929-3723-11-3
Name of Employer FIN Corp Development		Occupation Financial Analysis 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="550.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Stephanie Bellamy		Date of Receipt
	Mailing Address 7260 Wissahickon Avenue		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19119
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-3706-11-47
Name of Employer FIN Corp Development		Occupation Financial Analysis 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="550.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) Stephanie Bellamy		Date of Receipt
	Mailing Address 7260 Wissahickon Avenue		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Philadelphia	PA	19119
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091027-3702-12-36
Name of Employer FIN Corp Development		Occupation Financial Analysis 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="550.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="75.00"/>
TOTAL 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 14 / 199
(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)
John M. Belsen

Mailing Address 10 Brookview Cir

City Windsor Locks State CT Zip Code 06096

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

Name of Employer CIGNA CORPORATION Occupation Treasury Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-1896-11-47
 Amount of Each Receipt this Period: 10.00

B.

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

Mailing Address 10 Brookview Cir

City Windsor Locks State CT Zip Code 06096

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

Name of Employer CIGNA CORPORATION Occupation Treasury Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-1893-12-36
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
Jodi M. Berry

Mailing Address 179 McIntosh Circle

City Jackson State GA Zip Code 30233

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 ▼ 226.05

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-8480-11-3
 Amount of Each Receipt this Period: 3.09

SUBTOTAL of Receipts This Page (optional) ► **23.09**

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 / 199
(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)
Jodi M. Berry

Mailing Address 179 McIntosh Circle

City State Zip Code
Jackson GA 30233

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 ▼
226.05

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-8453-11-47

Amount of Each Receipt this Period
3.09

B.

Full Name (Last, First, Middle Initial)
Jodi M. Berry

Mailing Address 179 McIntosh Circle

City State Zip Code
Jackson GA 30233

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 ▼
226.05

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2009

Transaction ID: 20091027-8447-12-36

Amount of Each Receipt this Period
11.52

C.

Full Name (Last, First, Middle Initial)
Gail M. Billet

Mailing Address 55 Terry Road

City State Zip Code
Hartford CT 06105

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 ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-2267-11-47

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **24.61**

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 / 199
(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)
Gail M. Billet

Mailing Address 55 Terry Road

City State Zip Code
Hartford CT 06105

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 Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-2264-12-36

Amount of Each Receipt this Period
10.00

B.

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

Mailing Address 11 Colts Run Rd

City State Zip Code
Princeton NJ 08540

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE General Manager
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20090929-10527-11-3

Amount of Each Receipt this Period
25.00

C.

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

Mailing Address 11 Colts Run Rd

City State Zip Code
Princeton NJ 08540

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE General Manager
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-10487-11-47

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 199

(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)
Kim Bimestefer

Mailing Address 11 Colts Run Rd

City State Zip Code
Princeton NJ 08540

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 ▼
550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	9

Transaction ID: 20091027-10477-12-36

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Patricia A. Blaney

Mailing Address 125 Running Creek Church Road

City State Zip Code
Locust NC 28097

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Service Senior Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	9

Transaction ID: 20091013-4156-11-47

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Patricia A. Blaney

Mailing Address 125 Running Creek Church Road

City State Zip Code
Locust NC 28097

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Service Senior Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	9

Transaction ID: 20091027-4151-12-36

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 199

(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)
Ellen C. Bonner

Mailing Address 1403 Greenwood Avenue

City State Zip Code
Nashville TN 37206

FEC ID number of contributing federal political committee. C

Name of Employer L&PA Technology & Business Law
Occupation Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt M M / D D / Y Y Y Y
10 / 01 / 2009

Transaction ID: 20090929-17370-11-3

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Ellen C. Bonner

Mailing Address 1403 Greenwood Avenue

City State Zip Code
Nashville TN 37206

FEC ID number of contributing federal political committee. C

Name of Employer L&PA Technology & Business Law
Occupation Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt M M / D D / Y Y Y Y
10 / 15 / 2009

Transaction ID: 20091013-17290-11-47

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Ellen C. Bonner

Mailing Address 1403 Greenwood Avenue

City State Zip Code
Nashville TN 37206

FEC ID number of contributing federal political committee. C

Name of Employer L&PA Technology & Business Law
Occupation Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt M M / D D / Y Y Y Y
10 / 29 / 2009

Transaction ID: 20091027-17252-12-36

Amount of Each Receipt this Period 50.00

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: PAGE 19 / 199
(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)
Paul B. Borgesen

Mailing Address 7022 W Kimberly Way

City State Zip Code
Glendale AZ 85308

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

Name of Employer: CIGNA HEALTHCARE OF AZ, INC
Occupation: Otolaryngologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 484.88

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-7457-11-3
Amount of Each Receipt this Period: 22.04

B.

Full Name (Last, First, Middle Initial)
Paul B. Borgesen

Mailing Address 7022 W Kimberly Way

City State Zip Code
Glendale AZ 85308

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

Name of Employer: CIGNA HEALTHCARE OF AZ, INC
Occupation: Otolaryngologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 484.88

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-7434-11-47
Amount of Each Receipt this Period: 22.04

C.

Full Name (Last, First, Middle Initial)
Paul B. Borgesen

Mailing Address 7022 W Kimberly Way

City State Zip Code
Glendale AZ 85308

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

Name of Employer: CIGNA HEALTHCARE OF AZ, INC
Occupation: Otolaryngologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 484.88

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-7427-12-36
Amount of Each Receipt this Period: 22.04

SUBTOTAL of Receipts This Page (optional) ► 66.12

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 199
(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)
Kenneth T. Bowden

Mailing Address 65 Satari Dr

City State Zip Code
Coventry CT 06238

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
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-2262-11-47

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Kenneth T. Bowden

Mailing Address 65 Satari Dr

City State Zip Code
Coventry CT 06238

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
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-2259-12-36

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Brett C. Browchuk

Mailing Address 385 Deercliff Road

City State Zip Code
Avon CT 06001

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

Name of Employer Occupation
CIGNA Corporation Svp Service Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1870.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-17292-11-3

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 199
(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)
Brett C. Browchuk

Mailing Address 385 Deercliff Road

City State Zip Code
Avon CT 06001

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

Name of Employer Occupation
CIGNA Corporation Svp Service Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1870.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-17212-11-47

Amount of Each Receipt this Period

85.00

B.

Full Name (Last, First, Middle Initial)
Brett C. Browchuk

Mailing Address 385 Deercliff Road

City State Zip Code
Avon CT 06001

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

Name of Employer Occupation
CIGNA Corporation Svp Service Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1870.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-17174-12-36

Amount of Each Receipt this Period

85.00

C.

Full Name (Last, First, Middle Initial)
Patricia Brown

Mailing Address 405 W Kings Ave

City State Zip Code
Phoenix AZ 85023

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 ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-7423-11-47

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) ▶

180.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 199
	<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) Patricia Brown	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 405 W Kings Ave	Transaction ID: 20091027-7416-12-36
	City State Zip Code Phoenix AZ 85023	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE Senior Account Manager CO 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) Zigmund R. Brzezinski	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 15 Olden Dr	Transaction ID: 20090929-3167-11-3
	City State Zip Code Flemington NJ 08822	Amount of Each Receipt this Period 14.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE Operations Director CO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 329.31	

C.	Full Name (Last, First, Middle Initial) Zigmund R. Brzezinski	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 15 Olden Dr	Transaction ID: 20091013-3155-11-47
	City State Zip Code Flemington NJ 08822	Amount of Each Receipt this Period 14.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE Operations Director CO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 329.31	

SUBTOTAL of Receipts This Page (optional)	39.92
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 199
(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)
Zigmund R. Brzezinski

Mailing Address 15 Olden Dr

City State Zip Code
Flemington NJ 08822

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 329.31

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

Transaction ID: 20091027-3150-12-36

Amount of Each Receipt this Period
14.96

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 Occupation
CT GENERAL LIFE INSURANCE CO Account Manager-National Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 508.33

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

Transaction ID: 20090929-5387-11-3

Amount of Each Receipt this Period
9.62

C.

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 Occupation
CT GENERAL LIFE INSURANCE CO Account Manager-National Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 508.33

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-5365-11-47

Amount of Each Receipt this Period
9.62

SUBTOTAL of Receipts This Page (optional) ► **34.20**

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 24 / 199
	<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) M. Buckley	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 3651 N Leavitt St	Transaction ID: 20091027-5359-12-36
	City State Zip Code Chicago IL 60618	Amount of Each Receipt this Period 9.62
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Account Manager-National Accounts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 508.33	

B.	Full Name (Last, First, Middle Initial) Timothy D. Buckley	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 611 Shipton Lane	Transaction ID: 20090929-16909-11-3
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 29.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CIGNA Internation Occupation Vice President Bfo International Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 638.00	

C.	Full Name (Last, First, Middle Initial) Timothy D. Buckley	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 611 Shipton Lane	Transaction ID: 20091013-16831-11-47
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 29.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CIGNA Internation Occupation Vice President Bfo International Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 638.00	

SUBTOTAL of Receipts This Page (optional)	67.62
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 199
(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)
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 Occupation
CIGNA Internation Vice President Bfo International

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 638.00

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

Transaction ID: 20091027-16794-12-36

Amount of Each Receipt this Period
29.00

B. Full Name (Last, First, Middle Initial)
Gregory Cain

Mailing Address 3802 Highland Dr

City State Zip Code
Boothwyn PA 19061

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AM- ERICA Enterprise Account Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.10

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

Transaction ID: 20090929-10176-11-3

Amount of Each Receipt this Period
11.05

C. Full Name (Last, First, Middle Initial)
Gregory Cain

Mailing Address 3802 Highland Dr

City State Zip Code
Boothwyn PA 19061

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AM- ERICA Enterprise Account Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-10139-11-47

Amount of Each Receipt this Period
11.05

SUBTOTAL of Receipts This Page (optional) ► **51.10**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 199
(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) Gregory Cain		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 3802 Highland Dr		Transaction ID: 20091027-10129-12-36
City Boothwyn	State Zip Code PA 19061	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.05
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Enterprise Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.10	

B.

Full Name (Last, First, Middle Initial) Rudolph C. Cane		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 4619 E White Aster St		Transaction ID: 20090929-3729-11-3
City Phoenix	State Zip Code AZ 85044	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.25
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.50	

C.

Full Name (Last, First, Middle Initial) Rudolph C. Cane		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 4619 E White Aster St		Transaction ID: 20091013-3712-11-47
City Phoenix	State Zip Code AZ 85044	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.25
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.50	

SUBTOTAL of Receipts This Page (optional)	▶	49.55
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 199

(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)
Rudolph C. Cane

Mailing Address 4619 E White Aster St

City Phoenix State AZ Zip Code 85044

FEC ID number of contributing federal political committee. C

Name of Employer CIGNA HEALTHCARE OF AZ, INC
Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

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

Transaction ID: 20091027-3708-12-36

Amount of Each Receipt this Period 19.25

B.

Full Name (Last, First, Middle Initial)
John S. Cantrell

Mailing Address 415 Spanish Moss Court

City Coppell State TX Zip Code 75019

FEC ID number of contributing federal political committee. C

Name of Employer LIFE INS. CO. OF NORTH AMERICA
Occupation Corporate Security Senior Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-6917-11-47

Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
John S. Cantrell

Mailing Address 415 Spanish Moss Court

City Coppell State TX Zip Code 75019

FEC ID number of contributing federal political committee. C

Name of Employer LIFE INS. CO. OF NORTH AMERICA
Occupation Corporate Security Senior Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-6909-12-36

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) 39.25

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 28 / 199
(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 C. Carlson		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 70 Waterside Lane		Transaction ID: 20090929-823-11-3
City West Hartford	State CT	Zip Code 06107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Real Estate Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

B.

Full Name (Last, First, Middle Initial) William C. Carlson		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 70 Waterside Lane		Transaction ID: 20091013-819-11-47
City West Hartford	State CT	Zip Code 06107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Real Estate Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

C.

Full Name (Last, First, Middle Initial) William C. Carlson		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 70 Waterside Lane		Transaction ID: 20091027-816-12-36
City West Hartford	State CT	Zip Code 06107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Real Estate Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional)	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: (check only one)	PAGE 29 / 199
	<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) Kenneth B. Carter		Date of Receipt
	Mailing Address 2160 El Cajonita Dr		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	La Habra Heights	CA	90631
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Senior Counsel	Transaction ID: 20091013-7846-11-47
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="211.64"/>	<input type="text" value="9.62"/>

B.	Full Name (Last, First, Middle Initial) Kenneth B. Carter		Date of Receipt
	Mailing Address 2160 El Cajonita Dr		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	La Habra Heights	CA	90631
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Senior Counsel	Transaction ID: 20091027-7840-12-36
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="211.64"/>	<input type="text" value="9.62"/>

C.	Full Name (Last, First, Middle Initial) Charles R. Catalano		Date of Receipt
	Mailing Address 28 William Penn Rd		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Warren	NJ	07059
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation General Manager	Transaction ID: 20090929-1992-11-3
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="330.00"/>	<input type="text" value="15.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="34.24"/>
TOTAL 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 30 / 199
(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)
Charles R. Catalano

Mailing Address 28 William Penn Rd

City Warren State NJ Zip Code 07059

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 ▼ 330.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-1985-11-47

Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
Charles R. Catalano

Mailing Address 28 William Penn Rd

City Warren State NJ Zip Code 07059

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 ▼ 330.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-1982-12-36

Amount of Each Receipt this Period 15.00

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

Mailing Address 517 Wildflower Ln

City Media State PA Zip Code 19063

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

Name of Employer CIGNA CORPORATION Occupation Human Resources Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-10367-11-3

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 50.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 199
(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)
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: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-10328-11-47

Amount of Each Receipt this Period
20.00

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: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-10318-12-36

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: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1980.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-438-11-3

Amount of Each Receipt this Period
90.00

SUBTOTAL of Receipts This Page (optional) ▶

130.00

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 / 199
(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 ▼ 1980.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-437-11-47

Amount of Each Receipt this Period
90.00

B.

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 ▼ 1980.00

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

Transaction ID: 20091027-437-12-36

Amount of Each Receipt this Period
90.00

C.

Full Name (Last, First, Middle Initial)
Janice J. Cobb

Mailing Address 2341 Stonesage Rd

City State Zip Code
Soddy Daisy TN 37379

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Customer Service Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-5438-11-47

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **190.00**

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 / 199
(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)
Janice J. Cobb

Mailing Address 2341 Stonesage Rd

City State Zip Code
Soddy Daisy TN 37379

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Customer Service Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-5432-12-36

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Stuart J. Cohen

Mailing Address 99 Hummingbird Dr

City State Zip Code
Berlin CT 06037

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

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

Transaction ID: 20090929-14109-11-3

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Stuart J. Cohen

Mailing Address 99 Hummingbird Dr

City State Zip Code
Berlin CT 06037

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-14051-11-47

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 50.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 199
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
Stuart J. Cohen

Mailing Address 99 Hummingbird Dr

City State Zip Code
Berlin CT 06037

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

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

Transaction ID: 20091027-14029-12-36

Amount of Each Receipt this Period
20.00

B.

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 & Chief Oper Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2640.00

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

Transaction ID: 20090929-536-11-3

Amount of Each Receipt this Period
120.00

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 & Chief Oper Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2640.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-534-11-47

Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional) ► 260.00

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 35 / 199

(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 & Chief Oper Officer
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2640.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-533-12-36

Amount of Each Receipt this Period
120.00

B.

Full Name (Last, First, Middle Initial)
Alice Cotti

Mailing Address 1625 Cumberland Ter

City State Zip Code
Glendale CA 91202

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AM- Group Claims Senior Specialist
ERICA

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-13717-11-47

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Alice Cotti

Mailing Address 1625 Cumberland Ter

City State Zip Code
Glendale CA 91202

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AM- Group Claims Senior Specialist
ERICA

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-13695-12-36

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ►

140.00

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 36 / 199
	<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) Henri R. Courmand	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 6009 Tiffield Way	Transaction ID: 20090929-8477-11-3
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation 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 ▼ 440.00	

B.	Full Name (Last, First, Middle Initial) Henri R. Courmand	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 6009 Tiffield Way	Transaction ID: 20091013-8450-11-47
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation 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 ▼ 440.00	

C.	Full Name (Last, First, Middle Initial) Henri R. Courmand	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 6009 Tiffield Way	Transaction ID: 20091027-8444-12-36
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation 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 ▼ 440.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 199

(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 J. Coxon

Mailing Address 47 Leigh Gate Road

City State Zip Code
Glastonbury CT 06033-4174

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 ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-11062-11-3

Amount of Each Receipt this Period

20.00

B.

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 ▼ 423.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-16591-11-3

Amount of Each Receipt this Period

19.25

C.

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 ▼ 423.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-16516-11-47

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)

58.50

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 / 199
(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)
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 ▼ 423.50

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

Transaction ID: 20091027-16482-12-36

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 ▼ 550.00

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

Transaction ID: 20090929-10360-11-3

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 ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-10321-11-47

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: (check only one)	PAGE 39 / 199
	<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) Andrew D. Crooks	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 323 Turtle Trl	Transaction ID: 20091027-10311-12-36
	City State Zip Code Lake Mary FL 32746	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 Rvp Segment Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

B.	Full Name (Last, First, Middle Initial) Donald M. Curry	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 56 Harvard Ln	Transaction ID: 20090929-12535-11-3
	City State Zip Code Bedford NH 03110	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

C.	Full Name (Last, First, Middle Initial) Donald M. Curry	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 56 Harvard Ln	Transaction ID: 20091013-12487-11-47
	City State Zip Code Bedford NH 03110	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	65.00
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 40 / 199
(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 Bedford State NH Zip Code 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 ▼ 440.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-12471-12-36

Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Kristin Damato

Mailing Address 2610 John Marshall Drive North

City Arlington State VA Zip Code 22207

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

Name of Employer CIGNA CORPORATION Occupation Government Affairs Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-2907-11-3

Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Kristin Damato

Mailing Address 2610 John Marshall Drive North

City Arlington State VA Zip Code 22207

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

Name of Employer CIGNA CORPORATION Occupation Government Affairs Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-2897-11-47

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ▶ 50.00

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

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

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

FOR LINE NUMBER: PAGE 41 / 199
(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)
Kristin Damato

Mailing Address 2610 John Marshall Drive North

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
CIGNA CORPORATION Government Affairs Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: 20091027-2893-12-36

Amount of Each Receipt this Period
15.00

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 Occupation
CIGNA CORPORATION Vice President Chief Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20090929-259-11-3

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 Occupation
CIGNA CORPORATION Vice President Chief Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-258-11-47

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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 / 199
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Johannes M. De Jong	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 6122 Mccallum St	Transaction ID: 20091027-258-12-36
	City Philadelphia State PA Zip Code 19144	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CIGNA CORPORATION Occupation Vice President Chief Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 550.00	

B.	Full Name (Last, First, Middle Initial) Christopher De Rosa	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 7216 E Magdalena Dr	Transaction ID: 20091013-1900-11-47
	City Orange State CA Zip Code 92867	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 220.00	

C.	Full Name (Last, First, Middle Initial) Christopher De Rosa	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 7216 E Magdalena Dr	Transaction ID: 20091027-1897-12-36
	City Orange State CA Zip Code 92867	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 220.00	

SUBTOTAL of Receipts This Page (optional)	45.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 43 / 199
(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)
Edwin J. Detrick

Mailing Address 17 Swallow Rd

City State Zip Code
Holland PA 18966

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

Name of Employer Occupation
CIGNA CORPORATION Vice President Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

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

Transaction ID: 20090929-3019-11-3

Amount of Each Receipt this Period
20.00

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

Mailing Address 17 Swallow Rd

City State Zip Code
Holland PA 18966

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

Name of Employer Occupation
CIGNA CORPORATION Vice President Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-3007-11-47

Amount of Each Receipt this Period
20.00

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

Mailing Address 17 Swallow Rd

City State Zip Code
Holland PA 18966

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

Name of Employer Occupation
CIGNA CORPORATION Vice President Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

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

Transaction ID: 20091027-3002-12-36

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 199
(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) Keith Dixon		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 1715 Morgan Ave S		Transaction ID: 20090929-7186-11-3
City Minneapolis	State Zip Code MN 55405	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.	Occupation President Health Solutions	Aggregate Year-to-Date ▼ 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Keith Dixon		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 1715 Morgan Ave S		Transaction ID: 20091013-7164-11-47
City Minneapolis	State Zip Code MN 55405	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.	Occupation President Health Solutions	Aggregate Year-to-Date ▼ 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Keith Dixon		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 1715 Morgan Ave S		Transaction ID: 20091027-7156-12-36
City Minneapolis	State Zip Code MN 55405	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer CIGNA BEHAVIORAL HEALTH, INC.	Occupation President Health Solutions	Aggregate Year-to-Date ▼ 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 45 / 199
(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)
Jeannine Doherty

Mailing Address 1901 E Royal Palm Rd

City State Zip Code
Phoenix AZ 85020

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 ▼
534.00

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

Transaction ID: 20090929-32-11-3

Amount of Each Receipt this Period
6.25

B.

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

Mailing Address 1901 E Royal Palm Rd

City State Zip Code
Phoenix AZ 85020

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 ▼
534.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-32-11-47

Amount of Each Receipt this Period
6.25

C.

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

Mailing Address 1901 E Royal Palm Rd

City State Zip Code
Phoenix AZ 85020

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 ▼
534.00

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

Transaction ID: 20091027-32-12-36

Amount of Each Receipt this Period
8.60

SUBTOTAL of Receipts This Page (optional) ► **21.10**

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 46 / 199
(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)
Scott E. Doyle

Mailing Address 302 Highland Valley Ct.

City State Zip Code
Wylie TX 75098

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

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

Transaction ID: 20090929-12386-11-3

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Scott E. Doyle

Mailing Address 302 Highland Valley Ct.

City State Zip Code
Wylie TX 75098

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-12338-11-47

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Scott E. Doyle

Mailing Address 302 Highland Valley Ct.

City State Zip Code
Wylie TX 75098

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

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

Transaction ID: 20091027-12322-12-36

Amount of Each Receipt this Period
15.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 199
(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)
Edward L. Du Brow

Mailing Address 38 W Hayward Ave

City State Zip Code
Phoenix AZ 85021

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

Name of Employer
CIGNA HEALTHCARE OF AZ, INC

Occupation
Internal Medicine

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-1554-11-47

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Edward L. Du Brow

Mailing Address 38 W Hayward Ave

City State Zip Code
Phoenix AZ 85021

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

Name of Employer
CIGNA HEALTHCARE OF AZ, INC

Occupation
Internal Medicine

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-1552-12-36

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Andrew M. Dunn

Mailing Address 46 Mountain View Dr

City State Zip Code
West Hartford CT 06117

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Underwriting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-877-11-47

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 199
	<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) Andrew M. Dunn	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 46 Mountain View Dr	Transaction ID: 20091027-875-12-36
	City State Zip Code West Hartford CT 06117	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE Underwriting Director CO 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) Karen A. Easterly-Behrens	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 18332 Meridian Ave N	Transaction ID: 20091013-3739-11-47
	City State Zip Code Shoreline WA 98133	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INT'L REHAB. ASSOCIATES, INC. Nurse Case Manager Senior Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Karen A. Easterly-Behrens	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 18332 Meridian Ave N	Transaction ID: 20091027-3735-12-36
	City State Zip Code Shoreline WA 98133	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INT'L REHAB. ASSOCIATES, INC. Nurse Case Manager Senior Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

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

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

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

FOR LINE NUMBER: PAGE 49 / 199
(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)
Daryl W. Edmonds

Mailing Address 9211 Sand Hill St

City State Zip Code
Highlands Ranch CO 80126

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE General Manager
CO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20090929-7523-11-3

Amount of Each Receipt this Period
25.00

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

Mailing Address 9211 Sand Hill St

City State Zip Code
Highlands Ranch CO 80126

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE General Manager
CO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-7500-11-47

Amount of Each Receipt this Period
25.00

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

Mailing Address 9211 Sand Hill St

City State Zip Code
Highlands Ranch CO 80126

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE General Manager
CO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20091027-7493-12-36

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 50 / 199
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

A.

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

Mailing Address 17 Hillyer Way

City State Zip Code
Granby CT 06035

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

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

Transaction ID: 20090929-5543-11-3

Amount of Each Receipt this Period
11.00

B.

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

Mailing Address 17 Hillyer Way

City State Zip Code
Granby CT 06035

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-5520-11-47

Amount of Each Receipt this Period
11.00

C.

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

Mailing Address 17 Hillyer Way

City State Zip Code
Granby CT 06035

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

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

Transaction ID: 20091027-5514-12-36

Amount of Each Receipt this Period
11.00

SUBTOTAL of Receipts This Page (optional) ► **33.00**

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

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

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

FOR LINE NUMBER: PAGE 51 / 199
(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)
Leeanne Engels

Mailing Address 8 Sunset Trl

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 Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-1533-11-47

Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Leeanne Engels

Mailing Address 8 Sunset Trl

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 Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-1532-12-36

Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Beverly J. Everett

Mailing Address 8228 Academy Rd

City Ellicott City State MD Zip Code 21043

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-114-11-3

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 40.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 199
	<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) Beverly J. Everett		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 8228 Academy Rd		Transaction ID: 20091013-114-11-47		
	City Ellicott City	State MD	Zip Code 21043	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Medical Senior Director	Aggregate Year-to-Date 440.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Beverly J. Everett		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 8228 Academy Rd		Transaction ID: 20091027-114-12-36		
	City Ellicott City	State MD	Zip Code 21043	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Medical Senior Director	Aggregate Year-to-Date 440.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Kimberly Feltovic		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 905 S. 2nd Street		Transaction ID: 20090929-15122-11-3		
	City Philadelphia	State PA	Zip Code 19147	Amount of Each Receipt this Period 19.25	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CHC Sales Effectives Staffing	Occupation Account Director	Aggregate Year-to-Date 423.50		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

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 53 / 199
(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)
Kimberly Feltovic

Mailing Address 905 S. 2nd Street

City Philadelphia State PA Zip Code 19147

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

Name of Employer CHC Sales Effectives Staffing Occupation Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-15061-11-47

Amount of Each Receipt this Period 19.25

B.

Full Name (Last, First, Middle Initial)
Kimberly Feltovic

Mailing Address 905 S. 2nd Street

City Philadelphia State PA Zip Code 19147

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

Name of Employer CHC Sales Effectives Staffing Occupation Account Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-15033-12-36

Amount of Each Receipt this Period 19.25

C.

Full Name (Last, First, Middle Initial)
Staci F. Fernandez

Mailing Address 15 Dilaj Dr

City Columbia State CT Zip Code 06237

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Business Project Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-2211-11-3

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 58.50

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 54 / 199
(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)
Staci F. Fernandez

Mailing Address 15 Dilaj Dr

City Columbia State CT Zip Code 06237

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Business Project Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-2202-11-47
Amount of Each Receipt this Period: 20.00

B.

Full Name (Last, First, Middle Initial)
Staci F. Fernandez

Mailing Address 15 Dilaj Dr

City Columbia State CT Zip Code 06237

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Business Project Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-2199-12-36
Amount of Each Receipt this Period: 20.00

C.

Full Name (Last, First, Middle Initial)
David Ferriss

Mailing Address 7 Woods Lane

City Simsbury State CT Zip Code 06070

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Medical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-9640-11-3
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 65.00

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 55 / 199
(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)
David Ferriss

Mailing Address 7 Woods Lane

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
Medical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-9608-11-47

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
David Ferriss

Mailing Address 7 Woods Lane

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
Medical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-9599-12-36

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Scott M. Fillault

Mailing Address 135 Timrod Rd

City State Zip Code
Manchester CT 06040

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 ▼
440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-269-11-3

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: (check only one)	PAGE 56 / 199
	<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) Scott M. Filiault		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 135 Timrod Rd		Transaction ID: 20091013-268-11-47		
	City Manchester	State CT	Zip Code 06040	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Name of Employer CT GENERAL LIFE INSURANCE CO		
Occupation Operations Senior Director		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 440.00					

B.	Full Name (Last, First, Middle Initial) Scott M. Filiault		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 135 Timrod Rd		Transaction ID: 20091027-268-12-36		
	City Manchester	State CT	Zip Code 06040	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Name of Employer CT GENERAL LIFE INSURANCE CO		
Occupation Operations Senior Director		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 440.00					

C.	Full Name (Last, First, Middle Initial) David Fisher		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 1012 Balsam Dr		Transaction ID: 20091013-12589-11-47		
	City Washington	State PA	Zip Code 15301	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C		Name of Employer INT'L REHAB. ASSOCIATES, INC.		
Occupation Service Senior Specialist		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 220.00					

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 199

(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)
David Fisher

Mailing Address 1012 Balsam Dr

City State Zip Code
Washington PA 15301

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

Name of Employer Occupation
INT'L REHAB. ASSOCIATES, Service Senior Specialist
INC.

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-12573-12-36

Amount of Each Receipt this Period
10.00

B.

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

Mailing Address 6437 W. Voltaire Dr

City State Zip Code
Glendale AZ 85304

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

Name of Employer Occupation
CIGNA HEALTHCARE OF AZ, Medical Director
INC.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.64

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-11097-11-47

Amount of Each Receipt this Period
9.62

C.

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

Mailing Address 6437 W. Voltaire Dr

City State Zip Code
Glendale AZ 85304

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

Name of Employer Occupation
CIGNA HEALTHCARE OF AZ, Medical Director
INC.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.64

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-11084-12-36

Amount of Each Receipt this Period
9.62

SUBTOTAL of Receipts This Page (optional)

29.24

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 58 / 199
(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 H. Forde
Mailing Address 5 Brighton Ln
City Simsbury State CT Zip Code 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 ▼ 1980.00
Date of Receipt 10 / 01 / 2009
Transaction ID: 20090929-1035-11-3
Amount of Each Receipt this Period 90.00

B. Full Name (Last, First, Middle Initial)
Richard H. Forde
Mailing Address 5 Brighton Ln
City Simsbury State CT Zip Code 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 ▼ 1980.00
Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-1031-11-47
Amount of Each Receipt this Period 90.00

C. Full Name (Last, First, Middle Initial)
Richard H. Forde
Mailing Address 5 Brighton Ln
City Simsbury State CT Zip Code 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 ▼ 1980.00
Date of Receipt 10 / 29 / 2009
Transaction ID: 20091027-1029-12-36
Amount of Each Receipt this Period 90.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 199
(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)
Gregory M. Fox

Mailing Address 50 Southport Pl.

City Southport State CT Zip Code 06890

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Sales Manager-National Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-530-11-47

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Gregory M. Fox

Mailing Address 50 Southport Pl.

City Southport State CT Zip Code 06890

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Sales Manager-National Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-529-12-36

Amount of Each Receipt this Period
10.00

C.

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

Mailing Address 1004 Beech Bay Rd

City Poplar Grove State IL Zip Code 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 ▼ 440.00

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

Transaction ID: 20090929-3406-11-3

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 40.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 199
(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)
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 Occupation
CT GENERAL LIFE INSURANCE Sales Director-Sales Mgt
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	9	

Transaction ID: 20091013-3393-11-47

Amount of Each Receipt this Period
20.00

B. 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 Occupation
CT GENERAL LIFE INSURANCE Sales Director-Sales Mgt
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	9	

Transaction ID: 20091027-3388-12-36

Amount of Each Receipt this Period
20.00

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

Mailing Address 31 Lakeshore Dr

City State Zip Code
Rockaway NJ 07866

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) ▼ 423.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	9	

Transaction ID: 20090929-2386-11-3

Amount of Each Receipt this Period
19.25

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 61 / 199

(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 Garvey

Mailing Address 31 Lakeshore Dr

City State Zip Code
Rockaway NJ 07866

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 ▼
423.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-2376-11-47

Amount of Each Receipt this Period

19.25

B.

Full Name (Last, First, Middle Initial)
Thomas Garvey

Mailing Address 31 Lakeshore Dr

City State Zip Code
Rockaway NJ 07866

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 ▼
423.50

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-2372-12-36

Amount of Each Receipt this Period

19.25

C.

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

Mailing Address 4561 E Tierra Buena Ln

City State Zip Code
Phoenix AZ 85032

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Underwriting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.74

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-5016-12-36

Amount of Each Receipt this Period

9.17

SUBTOTAL of Receipts This Page (optional)

47.67

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 62 / 199
(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)
David J. Giannoni

Mailing Address 2030 James Farm Rd

City State Zip Code
Stratford CT 06614

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 ▼
552.79

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: 20090929-4839-11-3

Amount of Each Receipt this Period
6.73

B.

Full Name (Last, First, Middle Initial)
David J. Giannoni

Mailing Address 2030 James Farm Rd

City State Zip Code
Stratford CT 06614

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 ▼
552.79

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-4819-11-47

Amount of Each Receipt this Period
6.73

C.

Full Name (Last, First, Middle Initial)
David J. Giannoni

Mailing Address 2030 James Farm Rd

City State Zip Code
Stratford CT 06614

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 ▼
552.79

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: 20091027-4813-12-36

Amount of Each Receipt this Period
77.73

SUBTOTAL of Receipts This Page (optional) ► **91.19**

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 63 / 199
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Laurie A. Gondek		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 9 Delbon Ln		Transaction ID: 20091013-826-11-47		
	City Avon	State CT	Zip Code 06001	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Marketing Product Senior Director	Aggregate Year-to-Date 220.00		

B.	Full Name (Last, First, Middle Initial) Laurie A. Gondek		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 9 Delbon Ln		Transaction ID: 20091027-823-12-36		
	City Avon	State CT	Zip Code 06001	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Marketing Product Senior Director	Aggregate Year-to-Date 220.00		

C.	Full Name (Last, First, Middle Initial) Paul J. Gontarek		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 7442 Devon St		Transaction ID: 20090929-3544-11-3		
	City Philadelphia	State PA	Zip Code 19119	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION	Occupation Association Chief Counsel	Aggregate Year-to-Date 550.00		

SUBTOTAL of Receipts This Page (optional)	45.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 / 199
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

A.

Full Name (Last, First, Middle Initial) Paul J. Gontarek		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 7442 Devon St		Transaction ID: 20091013-3530-11-47
City Philadelphia	State PA	Zip Code 19119
FEC ID number of contributing federal political committee. C		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 ▼ 550.00	

B.

Full Name (Last, First, Middle Initial) Paul J. Gontarek		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 7442 Devon St		Transaction ID: 20091027-3525-12-36
City Philadelphia	State PA	Zip Code 19119
FEC ID number of contributing federal political committee. C		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 ▼ 550.00	

C.

Full Name (Last, First, Middle Initial) David A. Gordon		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 121 Grandview Dr		Transaction ID: 20090929-1279-11-3
City Glastonbury	State CT	Zip Code 06033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Marketing Product Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)	▶	65.00
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 65 / 199
	<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) David A. Gordon	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 121 Grandview Dr	Transaction ID: 20091013-1274-11-47
	City State Zip Code Glastonbury CT 06033	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Marketing Product Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

B.	Full Name (Last, First, Middle Initial) David A. Gordon	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 121 Grandview Dr	Transaction ID: 20091027-1272-12-36
	City State Zip Code Glastonbury CT 06033	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Marketing Product Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.	Full Name (Last, First, Middle Initial) Donna W. Gore	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 49 Briarwood Drive	Transaction ID: 20090929-244-11-3
	City State Zip Code Old Saybrook CT 06475	Amount of Each Receipt this Period 10.91
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Financial Analysis Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.02	

SUBTOTAL of Receipts This Page (optional)	▶	40.91
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 66 / 199

(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)
Donna W. Gore

Mailing Address 49 Briarwood Drive

City State Zip Code
Old Saybrook CT 06475

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Financial Analysis Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.02

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-243-11-47

Amount of Each Receipt this Period

10.91

B.

Full Name (Last, First, Middle Initial)
Donna W. Gore

Mailing Address 49 Briarwood Drive

City State Zip Code
Old Saybrook CT 06475

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Financial Analysis Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.02

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-243-12-36

Amount of Each Receipt this Period

10.91

C.

Full Name (Last, First, Middle Initial)
Kristen Gorodetzer

Mailing Address 111 Celestino Ct

City State Zip Code
Blackwood NJ 08012

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

Name of Employer Occupation
HR&S Talent Optimization Compensation Director

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-14648-11-47

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

31.82

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 67 / 199

(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)
Kristen Gorodetzer

Mailing Address 111 Celestino Ct

City State Zip Code
Blackwood NJ 08012

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

Name of Employer Occupation
HR&S Talent Optimization Compensation Director

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-14621-12-36

Amount of Each Receipt this Period

10.00

B.

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

Mailing Address 48 Brian Dr

City State Zip Code
Hebron CT 06248

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

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-780-11-47

Amount of Each Receipt this Period

10.00

C.

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

Mailing Address 48 Brian Dr

City State Zip Code
Hebron CT 06248

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

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-777-12-36

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 199
(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)
Stacie Grassmuck

Mailing Address 123 Town Square Place #186

City State Zip Code
Jersey City NJ 07310

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Enterprise Account Manager
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-4504-11-47

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Stacie Grassmuck

Mailing Address 123 Town Square Place #186

City State Zip Code
Jersey City NJ 07310

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Enterprise Account Manager
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-4498-12-36

Amount of Each Receipt this Period
10.00

C.

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 ▼ 550.00

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

Transaction ID: 20090929-2287-11-3

Amount of Each Receipt this Period
25.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 199
	<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) Richard Gray		Date of Receipt
	Mailing Address 138 Ballard Dr		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	West Hartford	CT	06119
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-2278-11-47
Name of Employer CIGNA CORPORATION		Occupation Strat and Business Develop Senior Dire	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="25.00"/>
		<input type="text" value="550.00"/>	

B.	Full Name (Last, First, Middle Initial) Richard Gray		Date of Receipt
	Mailing Address 138 Ballard Dr		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	West Hartford	CT	06119
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091027-2274-12-36
Name of Employer CIGNA CORPORATION		Occupation Strat and Business Develop Senior Dire	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="25.00"/>
		<input type="text" value="550.00"/>	

C.	Full Name (Last, First, Middle Initial) Jared Gross		Date of Receipt
	Mailing Address 17 Hickory Lane		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	West Hartford	CT	06107
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-276-11-47
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Underwriting 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="10.00"/>
		<input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="60.00"/>
TOTAL 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 70 / 199
(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)
Jared Gross

Mailing Address 17 Hickory 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 Underwriting Senior Director
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-276-12-36

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Craig J. Guiffre

Mailing Address 17 Pheasant Lane

City State Zip Code
Scotch Plains NJ 07076

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

Name of Employer Occupation
CGI CGI Executive Staff Vice President Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1980.00

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

Transaction ID: 20090929-17545-11-3

Amount of Each Receipt this Period
90.00

C.

Full Name (Last, First, Middle Initial)
Craig J. Guiffre

Mailing Address 17 Pheasant Lane

City State Zip Code
Scotch Plains NJ 07076

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

Name of Employer Occupation
CGI CGI Executive Staff Vice President Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1980.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-17465-11-47

Amount of Each Receipt this Period
90.00

SUBTOTAL of Receipts This Page (optional) ► 190.00

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 71 / 199
	<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) Craig J. Guiffre		Date of Receipt
	Mailing Address 17 Pheasant Lane		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Scotch Plains	NJ	07076
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CGI CGI Executive Staff		Occupation Vice President Sales	Transaction ID: 20091027-17425-12-36
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="1980.00"/>	<input type="text" value="90.00"/>

B.	Full Name (Last, First, Middle Initial) Douglas R. Hadley		Date of Receipt
	Mailing Address 126 Hopmeadow Street		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Weatogue	CT	06089
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INT'L REHAB. ASSOCIATES, INC.		Occupation Medical Officer	Transaction ID: 20090929-7878-11-3
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="550.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) Douglas R. Hadley		Date of Receipt
	Mailing Address 126 Hopmeadow Street		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Weatogue	CT	06089
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INT'L REHAB. ASSOCIATES, INC.		Occupation Medical Officer	Transaction ID: 20091013-7853-11-47
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="550.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="140.00"/>
TOTAL 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: (check only one)	PAGE 72 / 199
	<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) Douglas R. Hadley	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 126 Hopmeadow Street	Transaction ID: 20091027-7847-12-36
	City State Zip Code Weatogue CT 06089	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INT'L REHAB. ASSOCIATES, INC. Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

B.	Full Name (Last, First, Middle Initial) Annmarie T. Hagan	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 113 Waterwillow Rd	Transaction ID: 20091013-10477-11-47
	City State Zip Code West Chester PA 19380	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Executive Vice President Chief Financi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Annmarie T. Hagan	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 113 Waterwillow Rd	Transaction ID: 20091027-10467-12-36
	City State Zip Code West Chester PA 19380	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Executive Vice President Chief Financi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	45.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 199
(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 R. Halford

Mailing Address 131 Crown Court

City State Zip Code
Troutman NC 28166

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 232.76

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-6333-11-3

Amount of Each Receipt this Period

10.58

B.

Full Name (Last, First, Middle Initial)
Michael R. Halford

Mailing Address 131 Crown Court

City State Zip Code
Troutman NC 28166

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 232.76

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-6310-11-47

Amount of Each Receipt this Period

10.58

C.

Full Name (Last, First, Middle Initial)
Michael R. Halford

Mailing Address 131 Crown Court

City State Zip Code
Troutman NC 28166

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 232.76

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-6303-12-36

Amount of Each Receipt this Period

10.58

SUBTOTAL of Receipts This Page (optional)

31.74

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 199
(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)
Joseph L. Hannah
Mailing Address 9414 Indianfield DV
City Mechanicsville State VA Zip Code 23116
FEC ID number of contributing federal political committee. **C**

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009
Transaction ID: 20090929-6421-11-3
Amount of Each Receipt this Period
20.00

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Senior Sales Representative
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

B. Full Name (Last, First, Middle Initial)
Joseph L. Hannah
Mailing Address 9414 Indianfield DV
City Mechanicsville State VA Zip Code 23116
FEC ID number of contributing federal political committee. **C**

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009
Transaction ID: 20091013-6398-11-47
Amount of Each Receipt this Period
20.00

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Senior Sales Representative
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

C. Full Name (Last, First, Middle Initial)
Joseph L. Hannah
Mailing Address 9414 Indianfield DV
City Mechanicsville State VA Zip Code 23116
FEC ID number of contributing federal political committee. **C**

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009
Transaction ID: 20091027-6391-12-36
Amount of Each Receipt this Period
20.00

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Senior Sales Representative
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 199
(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)
H. Hanway

Mailing Address 1005 Bent Rd

City State Zip Code
Media PA 19063

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

Name of Employer Occupation
CIGNA CORPORATION Chairman and Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4230.60

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

Transaction ID: 20090929-3464-11-3

Amount of Each Receipt this Period
192.30

B.

Full Name (Last, First, Middle Initial)
H. Hanway

Mailing Address 1005 Bent Rd

City State Zip Code
Media PA 19063

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

Name of Employer Occupation
CIGNA CORPORATION Chairman and Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4230.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-3450-11-47

Amount of Each Receipt this Period
192.30

C.

Full Name (Last, First, Middle Initial)
H. Hanway

Mailing Address 1005 Bent Rd

City State Zip Code
Media PA 19063

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

Name of Employer Occupation
CIGNA CORPORATION Chairman and Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4230.60

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

Transaction ID: 20091027-3445-12-36

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ► **576.90**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one) <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 76 / 199
-------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------

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

A.	Full Name (Last, First, Middle Initial) Ben K. Haynes	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 2 Collins View Road	Transaction ID: 20091013-4450-11-47
	City State Zip Code Canton CT 06019	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Ben K. Haynes	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 2 Collins View Road	Transaction ID: 20091027-4444-12-36
	City State Zip Code Canton CT 06019	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Cheryl S. Haynes	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 5320 Sunnyvale Dr	Transaction ID: 20090929-4535-11-3
	City State Zip Code Antioch TN 37013	Amount of Each Receipt this Period 11.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Business Analysis Senior Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 199 (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

<p>A. Full Name (Last, First, Middle Initial) Cheryl S. Haynes</p> <p>Mailing Address 5320 Sunnysvale Dr</p> <p>City State Zip Code Antioch TN 37013</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation CT GENERAL LIFE INSURANCE Business Analysis Senior Spec CO</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 242.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: 20091013-4515-11-47</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>11.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	9		11.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	5		2	0	0	9														
	11.00																						

<p>B. Full Name (Last, First, Middle Initial) Cheryl S. Haynes</p> <p>Mailing Address 5320 Sunnysvale Dr</p> <p>City State Zip Code Antioch TN 37013</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation CT GENERAL LIFE INSURANCE Business Analysis Senior Spec CO</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 242.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: 20091027-4509-12-36</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>11.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0	9		11.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	9		2	0	0	9														
	11.00																						

<p>C. Full Name (Last, First, Middle Initial) Thomas M. Healy</p> <p>Mailing Address 41 Bradley Corners Rd</p> <p>City State Zip Code Madison CT 06443</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation CT GENERAL LIFE INSURANCE Corporate Security Manager CO</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 220.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: 20091013-1968-11-47</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>10.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	9		10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	5		2	0	0	9														
	10.00																						

<p>SUBTOTAL of Receipts This Page (optional)</p>	<table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">32.00</td> </tr> </table>	32.00
32.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td> </tr> </table>	

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

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

FOR LINE NUMBER: PAGE 78 / 199
(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 M. Healy

Mailing Address 41 Bradley Corners Rd

City Madison State CT Zip Code 06443

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Corporate Security Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-1965-12-36

Amount of Each Receipt this Period 10.00

B.

Full Name (Last, First, Middle Initial)
Clay R. Hedlund

Mailing Address 2504 Briarcrest Dr

City Irving State TX Zip Code 75063

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

Name of Employer CIGNA DENTAL HEALTH, INC. Occupation Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 279.62

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-7857-11-3

Amount of Each Receipt this Period 12.71

C.

Full Name (Last, First, Middle Initial)
Clay R. Hedlund

Mailing Address 2504 Briarcrest Dr

City Irving State TX Zip Code 75063

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

Name of Employer CIGNA DENTAL HEALTH, INC. Occupation Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 279.62

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-7832-11-47

Amount of Each Receipt this Period 12.71

SUBTOTAL of Receipts This Page (optional) ► 35.42

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 79 / 199

(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)

Clay R. Hedlund

Mailing Address 2504 Briarcrest Dr

City State Zip Code
Irving TX 75063

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

Name of Employer Occupation
CIGNA DENTAL HEALTH, INC. Dentist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 279.62

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-7826-12-36

Amount of Each Receipt this Period

12.71

B.

Full Name (Last, First, Middle Initial)

Niels A. Heemsker

Mailing Address 107 Seneca Trl

City State Zip Code
Bloomington IL 60108

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

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

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-14034-11-47

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Niels A. Heemsker

Mailing Address 107 Seneca Trl

City State Zip Code
Bloomington IL 60108

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

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

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-14012-12-36

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

32.71

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 80 / 199
	<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) G. Hoagland	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 10012 Rough Run Court	Transaction ID: 20090929-17241-11-3
	City State Zip Code Fairfax VA 22039	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 1540.00	

B.	Full Name (Last, First, Middle Initial) G. Hoagland	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 10012 Rough Run Court	Transaction ID: 20091013-17161-11-47
	City State Zip Code Fairfax VA 22039	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 1540.00	

C.	Full Name (Last, First, Middle Initial) G. Hoagland	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 10012 Rough Run Court	Transaction ID: 20091027-17123-12-36
	City State Zip Code Fairfax VA 22039	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 1540.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 199

(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)
Kathleen M. Hockmuth

Mailing Address 135 Brackett Rd

City State Zip Code
Rye NH 03870

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Compliance 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
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-625-11-47

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Kathleen M. Hockmuth

Mailing Address 135 Brackett Rd

City State Zip Code
Rye NH 03870

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Compliance 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
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-624-12-36

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Robert P. Hockmuth

Mailing Address 135 Brackett Rd

City State Zip Code
Rye NH 03870

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 423.28

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-887-11-3

Amount of Each Receipt this Period
19.24

SUBTOTAL of Receipts This Page (optional)

39.24

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 82 / 199
(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 P. Hockmuth

Mailing Address 135 Brackett Rd

City Rye State NH Zip Code 03870

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Medical Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.28

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-883-11-47
Amount of Each Receipt this Period: 19.24

B.

Full Name (Last, First, Middle Initial)
Robert P. Hockmuth

Mailing Address 135 Brackett Rd

City Rye State NH Zip Code 03870

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Medical Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.28

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-881-12-36
Amount of Each Receipt this Period: 19.24

C.

Full Name (Last, First, Middle Initial)
Mary T. Hoeltzel

Mailing Address 213 Orchard Way

City Wayne State PA Zip Code 19087

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

Name of Employer: FIN CIGNA Financial Reporting
Occupation: Vice President Chief Accounting Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-18675-11-47
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► **48.48**

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 83 / 199
(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)
Mary T. Hoeltzel

Mailing Address 213 Orchard Way

City State Zip Code
Wayne PA 19087

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

Name of Employer Occupation
FIN CIGNA Financial Reporting Vice President Chief Accounting Office

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-18631-12-36

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Tamara Horwitz

Mailing Address 3430 List Place

City State Zip Code
Minneapolis MN 55416

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

Name of Employer Occupation
Account Manager-National Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

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

Transaction ID: 20090929-22870-11-3

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Tamara Horwitz

Mailing Address 3430 List Place

City State Zip Code
Minneapolis MN 55416

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

Name of Employer Occupation
Account Manager-National Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-22765-11-47

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **50.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 199

(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)
Tamara Horwitz

Mailing Address 3430 List Place

City State Zip Code
Minneapolis MN 55416

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

Name of Employer Occupation
Occupation Manager-National Accounts

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-22672-12-36

Amount of Each Receipt this Period

20.00

B.

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

Mailing Address 181 Reverknolls

City State Zip Code
Avon CT 06001

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 ▼ 211.64

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-1034-11-47

Amount of Each Receipt this Period

9.62

C.

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

Mailing Address 181 Reverknolls

City State Zip Code
Avon CT 06001

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 ▼ 211.64

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-1032-12-36

Amount of Each Receipt this Period

9.62

SUBTOTAL of Receipts This Page (optional) ▶

39.24

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 85 / 199
(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		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 6 Westborough Dr		Transaction ID: 20090929-1082-11-3
City Weatogue	State CT	Zip Code 06089
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 App Development Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

B.

Full Name (Last, First, Middle Initial) Dale Hovey		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 6 Westborough Dr		Transaction ID: 20091013-1078-11-47
City Weatogue	State CT	Zip Code 06089
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 App Development Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

C.

Full Name (Last, First, Middle Initial) Dale Hovey		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 6 Westborough Dr		Transaction ID: 20091027-1076-12-36
City Weatogue	State CT	Zip Code 06089
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 App Development Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 199
(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)
Moin M. Iftekhar

Mailing Address 210 Cabot Court

City State Zip Code
Deptford NJ 08096

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Database Administrator Manager
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 227.71

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

Transaction ID: 20090929-2428-11-3

Amount of Each Receipt this Period
10.35

B.

Full Name (Last, First, Middle Initial)
Moin M. Iftekhar

Mailing Address 210 Cabot Court

City State Zip Code
Deptford NJ 08096

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Database Administrator Manager
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 227.71

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-2418-11-47

Amount of Each Receipt this Period
10.35

C.

Full Name (Last, First, Middle Initial)
Moin M. Iftekhar

Mailing Address 210 Cabot Court

City State Zip Code
Deptford NJ 08096

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Database Administrator Manager
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 227.71

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

Transaction ID: 20091027-2414-12-36

Amount of Each Receipt this Period
10.35

SUBTOTAL of Receipts This Page (optional) ► **31.05**

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 87 / 199
	<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) Abdul-Alim Issa		Date of Receipt
	Mailing Address 5 Corvette Ct		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New Castle	DE	19720
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 20090929-134-11-3
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation Underwriting 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="550.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Abdul-Alim Issa		Date of Receipt
	Mailing Address 5 Corvette Ct		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New Castle	DE	19720
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 20091013-134-11-47
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation Underwriting 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="550.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) Abdul-Alim Issa		Date of Receipt
	Mailing Address 5 Corvette Ct		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New Castle	DE	19720
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 20091027-134-12-36
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation Underwriting 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="550.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="75.00"/>
TOTAL 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 88 / 199
(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)
Malcolm D. Jackson

Mailing Address 28 Cedar Meadow Lane

City State Zip Code
Media PA 19063

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

Name of Employer Occupation
CIGNA CORPORATION Business Unit I.T. Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 594.00

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

Transaction ID: 20090929-16147-11-3

Amount of Each Receipt this Period
27.00

B. Full Name (Last, First, Middle Initial)
Malcolm D. Jackson

Mailing Address 28 Cedar Meadow Lane

City State Zip Code
Media PA 19063

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

Name of Employer Occupation
CIGNA CORPORATION Business Unit I.T. Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 594.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-16077-11-47

Amount of Each Receipt this Period
27.00

C. Full Name (Last, First, Middle Initial)
Malcolm D. Jackson

Mailing Address 28 Cedar Meadow Lane

City State Zip Code
Media PA 19063

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

Name of Employer Occupation
CIGNA CORPORATION Business Unit I.T. Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 594.00

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

Transaction ID: 20091027-16043-12-36

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional) ► **81.00**

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 89 / 199
(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)
William S. Jameson

Mailing Address 690 Bradford St

City Pasadena State CA Zip Code 91105

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Association Chief Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-8072-11-3

Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
William S. Jameson

Mailing Address 690 Bradford St

City Pasadena State CA Zip Code 91105

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Association Chief Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-8047-11-47

Amount of Each Receipt this Period 25.00

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

Mailing Address 690 Bradford St

City Pasadena State CA Zip Code 91105

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Association Chief Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-8041-12-36

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 90 / 199
(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)
David C. Jamieson

Mailing Address 25 River Drive South, #2406

City State Zip Code
Jersey City NJ 07310

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

Name of Employer Occupation
CIGNA CORPORATION Account Manager-National Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

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

Transaction ID: 20090929-17339-11-3

Amount of Each Receipt this Period
12.00

B.

Full Name (Last, First, Middle Initial)
David C. Jamieson

Mailing Address 25 River Drive South, #2406

City State Zip Code
Jersey City NJ 07310

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

Name of Employer Occupation
CIGNA CORPORATION Account Manager-National Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-17259-11-47

Amount of Each Receipt this Period
12.00

C.

Full Name (Last, First, Middle Initial)
David C. Jamieson

Mailing Address 25 River Drive South, #2406

City State Zip Code
Jersey City NJ 07310

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

Name of Employer Occupation
CIGNA CORPORATION Account Manager-National Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

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

Transaction ID: 20091027-17221-12-36

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional) ► **36.00**

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 91 / 199
(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)
Frank Edward Jones

Mailing Address 2622 Cedarvue Dr

City State Zip Code
Upper St Clair PA 15241

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 ▼ 358.24

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-3696-11-3
Amount of Each Receipt this Period: 16.28

B. Full Name (Last, First, Middle Initial)
Frank Edward Jones

Mailing Address 2622 Cedarvue Dr

City State Zip Code
Upper St Clair PA 15241

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 ▼ 358.24

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-3679-11-47
Amount of Each Receipt this Period: 16.28

C. Full Name (Last, First, Middle Initial)
Frank Edward Jones

Mailing Address 2622 Cedarvue Dr

City State Zip Code
Upper St Clair PA 15241

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 ▼ 358.24

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-3674-12-36
Amount of Each Receipt this Period: 16.28

SUBTOTAL of Receipts This Page (optional) ► 48.84

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 92 / 199
(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 Medical Officer
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20090929-8743-11-3

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 Medical Officer
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-8716-11-47

Amount of Each Receipt this Period
25.00

C.

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 Medical Officer
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: 20091027-8710-12-36

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 93 / 199
(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)
Jeffrey L. Kang

Mailing Address 50 Stoneham Dr

City State Zip Code
West Hartford CT 06117

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 ▼ 2200.00

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

Transaction ID: 20090929-11681-11-3

Amount of Each Receipt this Period
100.00

B.

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

Mailing Address 50 Stoneham Dr

City State Zip Code
West Hartford CT 06117

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 ▼ 2200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-11633-11-47

Amount of Each Receipt this Period
100.00

C.

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

Mailing Address 50 Stoneham Dr

City State Zip Code
West Hartford CT 06117

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 ▼ 2200.00

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

Transaction ID: 20091027-11619-12-36

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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 94 / 199
(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) Rhonda M. Karlin		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 162 Four Mile Rd		Transaction ID: 20091013-1989-11-47		
	City West Hartford	State CT	Zip Code 06107	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C		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 ▼ 220.00					

B.	Full Name (Last, First, Middle Initial) Rhonda M. Karlin		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 162 Four Mile Rd		Transaction ID: 20091027-1986-12-36		
	City West Hartford	State CT	Zip Code 06107	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C		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 ▼ 220.00					

C.	Full Name (Last, First, Middle Initial) Benjamin W. Katz		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 3603a Happy Valley Rd		Transaction ID: 20090929-8255-11-3		
	City Lafayette	State CA	Zip Code 94549	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		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 ▼ 1100.00					

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 95 / 199
(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)
Benjamin W. Katz

Mailing Address 3603a Happy Valley Rd

City State Zip Code
Lafayette CA 94549

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

Name of Employer Occupation
CIGNA HEALTHCARE OF CA, INC. Provider Contracting Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-8230-11-47

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Benjamin W. Katz

Mailing Address 3603a Happy Valley Rd

City State Zip Code
Lafayette CA 94549

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

Name of Employer Occupation
CIGNA HEALTHCARE OF CA, INC. Provider Contracting Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

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

Transaction ID: 20091027-8224-12-36

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Eric E. Kaulfuss

Mailing Address 8518 Cavanaugh Lane

City State Zip Code
Hixson TN 37343

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Talent Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-3768-11-47

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **110.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 199
(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)
Eric E. Kaulfuss

Mailing Address 8518 Cavanaugh Lane

City Hixson State TN Zip Code 37343

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

Name of Employer CT GENERAL LIFE INSURANCE CO
Occupation Talent Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 29 / 2009
Transaction ID: 20091027-3764-12-36
Amount of Each Receipt this Period 10.00

B.

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

Mailing Address 2638 Bethel Crest Dr

City Bethel Park State PA Zip Code 15102

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

Name of Employer LIFE INS. CO. OF NORTH AMERICA
Occupation Group Claims Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-2748-11-47
Amount of Each Receipt this Period 10.00

C.

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

Mailing Address 2638 Bethel Crest Dr

City Bethel Park State PA Zip Code 15102

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

Name of Employer LIFE INS. CO. OF NORTH AMERICA
Occupation Group Claims Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 29 / 2009
Transaction ID: 20091027-2744-12-36
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 199
(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)
John M. Kissel

Mailing Address 106 E Valley Creek Rd

City State Zip Code
Plymouth Meeting PA 19462

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

Name of Employer Occupation
HR&S Talent Optimization Human Resources Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: 20090929-14708-11-3

Amount of Each Receipt this Period
15.00

B.

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

Mailing Address 106 E Valley Creek Rd

City State Zip Code
Plymouth Meeting PA 19462

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

Name of Employer Occupation
HR&S Talent Optimization Human Resources Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-14649-11-47

Amount of Each Receipt this Period
15.00

C.

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

Mailing Address 106 E Valley Creek Rd

City State Zip Code
Plymouth Meeting PA 19462

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

Name of Employer Occupation
HR&S Talent Optimization Human Resources Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: 20091027-14622-12-36

Amount of Each Receipt this Period
15.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 / 199
(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)
Kay L. Kretsch

Mailing Address 221 Lone Oak Village Way

City Nashville State TN Zip Code 37215

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

Name of Employer CHC Government Services Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-15399-11-3

Amount of Each Receipt this Period 20.00

B.

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

Mailing Address 221 Lone Oak Village Way

City Nashville State TN Zip Code 37215

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

Name of Employer CHC Government Services Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-15335-11-47

Amount of Each Receipt this Period 20.00

C.

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

Mailing Address 221 Lone Oak Village Way

City Nashville State TN Zip Code 37215

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

Name of Employer CHC Government Services Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-15306-12-36

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 99 / 199
	(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) Diana L. Kycia		Date of Receipt
	Mailing Address 98 Garfield Rd		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	West Hartford	CT	06107
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Operations Director	Transaction ID: 20090929-1066-11-3
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="283.62"/>	
		Amount of Each Receipt this Period	<input type="text" value="12.88"/>

B.	Full Name (Last, First, Middle Initial) Diana L. Kycia		Date of Receipt
	Mailing Address 98 Garfield Rd		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	West Hartford	CT	06107
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Operations Director	Transaction ID: 20091013-1062-11-47
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="283.62"/>	
		Amount of Each Receipt this Period	<input type="text" value="12.88"/>

C.	Full Name (Last, First, Middle Initial) Diana L. Kycia		Date of Receipt
	Mailing Address 98 Garfield Rd		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	West Hartford	CT	06107
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Operations Director	Transaction ID: 20091027-1060-12-36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="283.62"/>	
		Amount of Each Receipt this Period	<input type="text" value="12.88"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="38.64"/>
TOTAL 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: (check only one)	PAGE 100 / 199
	<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) Maria Y. Kyriakos		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 211 Hoyer Court		Transaction ID: 20091013-7873-11-47		
	City Wilmington	State DE	Zip Code 19803	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Human Resources Senior Director	Aggregate Year-to-Date 220.00		

B.	Full Name (Last, First, Middle Initial) Maria Y. Kyriakos		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 211 Hoyer Court		Transaction ID: 20091027-7867-12-36		
	City Wilmington	State DE	Zip Code 19803	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Human Resources Senior Director	Aggregate Year-to-Date 220.00		

C.	Full Name (Last, First, Middle Initial) Kenneth P. Langevin		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 32 Castlewood Rd		Transaction ID: 20090929-1548-11-3		
	City West Hartford	State CT	Zip Code 06107	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION	Occupation Association Chief Counsel	Aggregate Year-to-Date 330.00		

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 199
(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)
Kenneth P. Langevin

Mailing Address 32 Castlewood Rd

City State Zip Code
West Hartford CT 06107

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 ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-1543-11-47

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Kenneth P. Langevin

Mailing Address 32 Castlewood Rd

City State Zip Code
West Hartford CT 06107

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 ▼ 330.00

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

Transaction ID: 20091027-1541-12-36

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
R. Lara

Mailing Address 3657 E. Adobe Dr

City State Zip Code
Phoenix AZ 85050

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-3313-11-47

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **40.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 199

(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)
R. Lara

Mailing Address 3657 E. Adobe Dr

City State Zip Code
Phoenix AZ 85050

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-3308-12-36

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
F. Lastner

Mailing Address 505 Northfield Road

City State Zip Code
Devon PA 19333

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

Name of Employer
CIGNA CORPORATION

Occupation
Vice President Internal Audit

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.64

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-16944-11-47

Amount of Each Receipt this Period

9.62

C.

Full Name (Last, First, Middle Initial)
F. Lastner

Mailing Address 505 Northfield Road

City State Zip Code
Devon PA 19333

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

Name of Employer
CIGNA CORPORATION

Occupation
Vice President Internal Audit

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.64

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-16907-12-36

Amount of Each Receipt this Period

9.62

SUBTOTAL of Receipts This Page (optional)

29.24

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 103 / 199
	<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) Alfredo Lathrop		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 11250 Signature Blvd.		Transaction ID: 20091013-4757-11-47		
	City Selbyville	State DE	Zip Code 19975	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation Vice President Human Resources		
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) Alfredo Lathrop		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 11250 Signature Blvd.		Transaction ID: 20091027-4751-12-36		
	City Selbyville	State DE	Zip Code 19975	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation Vice President Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

C.	Full Name (Last, First, Middle Initial) William P. Lawless		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 509 S Bay Shore Blvd		Transaction ID: 20090929-2201-11-3		
	City Gilbert	State AZ	Zip Code 85233	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation Family Practice		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 199
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

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

Mailing Address 509 S Bay Shore 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-2192-11-47

Amount of Each Receipt this Period
20.00

B.

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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

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

Transaction ID: 20091027-2189-12-36

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 14015 Citrus Crest Circle

City State Zip Code
Tampa FL 33625

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Operations Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 306.41

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

Transaction ID: 20090929-3983-11-3

Amount of Each Receipt this Period
13.92

SUBTOTAL of Receipts This Page (optional) ► **53.92**

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 105 / 199
	<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) Lisa Lawrence		Date of Receipt
	Mailing Address 14015 Citrus Crest Circle		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tampa	FL	33625
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-3967-11-47
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Operations 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="306.41"/>	<input type="text" value="13.92"/>

B.	Full Name (Last, First, Middle Initial) Lisa Lawrence		Date of Receipt
	Mailing Address 14015 Citrus Crest Circle		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tampa	FL	33625
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091027-3963-12-36
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Operations 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="306.41"/>	<input type="text" value="13.92"/>

C.	Full Name (Last, First, Middle Initial) Charles Levine		Date of Receipt
	Mailing Address 6469 NE 186th St		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Kenmore	WA	98028
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-3293-11-47
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Provider Contracting 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="211.64"/>	<input type="text" value="9.62"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="37.46"/>
TOTAL 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 106 / 199
(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 Levine		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 6469 NE 186th St		Transaction ID: 20091027-3288-12-36
City Kenmore	State Zip Code WA 98028	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.62
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	

B.

Full Name (Last, First, Middle Initial) Thomas X. Lonergan		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 35 Shingle Mill Rd		Transaction ID: 20091013-423-11-47
City West Simsbury	State Zip Code CT 06092	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Actuarial Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.

Full Name (Last, First, Middle Initial) Thomas X. Lonergan		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 35 Shingle Mill Rd		Transaction ID: 20091027-423-12-36
City West Simsbury	State Zip Code CT 06092	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Actuarial Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 / 199
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) David Long	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 27094 Prairie View Avenue	Transaction ID: 20091013-10357-11-47
	City State Zip Code Harrisburg SD 57032	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TEL-DRUG, INC. Operations 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) David Long	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 27094 Prairie View Avenue	Transaction ID: 20091027-10347-12-36
	City State Zip Code Harrisburg SD 57032	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TEL-DRUG, INC. Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Christopher R. Loomis	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 909 Overton Ave	Transaction ID: 20090929-5514-11-3
	City State Zip Code Yardley PA 19067	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Association Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 199
(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) Christopher R. Loomis		Date of Receipt
	Mailing Address 909 Overton Ave		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-5491-11-47
Name of Employer CIGNA CORPORATION		Occupation Association Chief Counsel	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="440.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Christopher R. Loomis		Date of Receipt
	Mailing Address 909 Overton Ave		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091027-5485-12-36
Name of Employer CIGNA CORPORATION		Occupation Association Chief Counsel	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="440.00"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Jon E. Maesner		Date of Receipt
	Mailing Address 22 Crosswood Rd		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Farmington	CT	06032
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090929-7886-11-3
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Clinical Program 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="330.00"/>	<input type="text" value="15.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="55.00"/>
TOTAL 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 109 / 199
(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) Jon E. Maesner		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 22 Crosswood Rd		Transaction ID: 20091013-7861-11-47
City Farmington	State Zip Code CT 06032	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Clinical Program Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

B.

Full Name (Last, First, Middle Initial) Jon E. Maesner		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 22 Crosswood Rd		Transaction ID: 20091027-7855-12-36
City Farmington	State Zip Code CT 06032	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Clinical Program Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.

Full Name (Last, First, Middle Initial) William J. Maher		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 16 Sheffield Dr		Transaction ID: 20090929-3931-11-3
City Moorestown	State Zip Code NJ 08057	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Financial Analysis Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

SUBTOTAL of Receipts This Page (optional)	▶	42.00
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 110 / 199
	<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. Maher	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 16 Sheffield Dr	Transaction ID: 20091013-3915-11-47
	City State Zip Code Moorestown NJ 08057	Amount of Each Receipt this Period 12.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Financial Analysis Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

B.	Full Name (Last, First, Middle Initial) William J. Maher	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 16 Sheffield Dr	Transaction ID: 20091027-3911-12-36
	City State Zip Code Moorestown NJ 08057	Amount of Each Receipt this Period 12.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Financial Analysis Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

C.	Full Name (Last, First, Middle Initial) Carla C. Mangiafico	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 47 Kelsey Ln	Transaction ID: 20090929-296-11-3
	City State Zip Code Glastonbury CT 06033	Amount of Each Receipt this Period 19.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Accounting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.00	

SUBTOTAL of Receipts This Page (optional)	43.00
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 111 / 199		
	<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

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) Carla C. Mangiafico		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 47 Kelsey Ln		Transaction ID: 20091013-295-11-47		
	City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 19.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Accounting Senior Director	Aggregate Year-to-Date 418.00		

B.	Full Name (Last, First, Middle Initial) Carla C. Mangiafico		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 47 Kelsey Ln		Transaction ID: 20091027-295-12-36		
	City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 19.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Accounting Senior Director	Aggregate Year-to-Date 418.00		

C.	Full Name (Last, First, Middle Initial) Mark P. Marsters		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 13 Devonshire Ln		Transaction ID: 20090929-12790-11-3		
	City Malvern	State PA	Zip Code 19355	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Vice President Service Operations	Aggregate Year-to-Date 1100.00		

SUBTOTAL of Receipts This Page (optional)	88.00
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 112 / 199
	<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	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 13 Devonshire Ln	Transaction ID: 20091013-12739-11-47
	City Malvern State PA Zip Code 19355	Amount of Each Receipt this Period 50.00
	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

B.	Full Name (Last, First, Middle Initial) Mark P. Marsters	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 13 Devonshire Ln	Transaction ID: 20091027-12723-12-36
	City Malvern State PA Zip Code 19355	Amount of Each Receipt this Period 50.00
	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C.	Full Name (Last, First, Middle Initial) Thomas J. Martel	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 23 Tack Ct	Transaction ID: 20090929-12377-11-3
	City Edgewater State MD Zip Code 21037	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 199
(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 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 ▼ 550.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-12329-11-47

Amount of Each Receipt this Period 25.00

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 ▼ 550.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-12313-12-36

Amount of Each Receipt this Period 25.00

C.

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

Mailing Address 43 S Taylor Point Dr

City The Woodlands State TX Zip Code 77382

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 ▼ 381.06

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-5108-11-3

Amount of Each Receipt this Period 17.31

SUBTOTAL of Receipts This Page (optional) ► 67.31

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 114 / 199
(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)
John W. Matheny

Mailing Address 43 S Taylor Point Dr

City State Zip Code
The Woodlands TX 77382

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 381.06

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-5086-11-47

Amount of Each Receipt this Period
17.31

B.

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

Mailing Address 43 S Taylor Point Dr

City State Zip Code
The Woodlands TX 77382

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 381.06

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

Transaction ID: 20091027-5080-12-36

Amount of Each Receipt this Period
17.31

C.

Full Name (Last, First, Middle Initial)
Wanda M. McConico

Mailing Address 12230 Sherman Dr

City State Zip Code
Charlotte NC 28273

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 Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-4142-11-47

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **44.62**

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 115 / 199

(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)

Wanda M. McConico

Mailing Address 12230 Sherman Dr

City State Zip Code
Charlotte NC 28273

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 ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-4137-12-36

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

William McGean

Mailing Address 10 Grosvenor Rd

City State Zip Code
Waltham MA 02453

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

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

Occupation
Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-10174-11-3

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

William McGean

Mailing Address 10 Grosvenor Rd

City State Zip Code
Waltham MA 02453

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

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

Occupation
Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-10137-11-47

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional) ▶

40.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 / 199
	<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 McGean	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 10 Grosvenor Rd	Transaction ID: 20091027-10127-12-36
	City State Zip Code Waltham MA 02453	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation LIFE INS. CO. OF NORTH AMERICA Operations Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date <input type="checkbox"/> 330.00	

B.	Full Name (Last, First, Middle Initial) Sheila McGinley-Graziosi	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 32 Starview Dr	Transaction ID: 20091013-1614-11-47
	City State Zip Code Glastonbury CT 06033	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date <input type="checkbox"/> 220.00	

C.	Full Name (Last, First, Middle Initial) Sheila McGinley-Graziosi	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 32 Starview Dr	Transaction ID: 20091027-1612-12-36
	City State Zip Code Glastonbury CT 06033	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date <input type="checkbox"/> 220.00	

SUBTOTAL of Receipts This Page (optional)	<input type="checkbox"/> 35.00
TOTAL This Period (last page this line number only)	<input type="checkbox"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 199
(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)
Susan E. McMurray

Mailing Address 32 Bass Dr

City State Zip Code
Enfield CT 06082

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Accounting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-548-11-47

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Susan E. McMurray

Mailing Address 32 Bass Dr

City State Zip Code
Enfield CT 06082

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Accounting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-547-12-36

Amount of Each Receipt this Period

10.00

C.

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

Mailing Address 1359 Shady Knoll Ct

City State Zip Code
Longwood FL 32750

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 ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-5676-11-47

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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

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

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

FOR LINE NUMBER: PAGE 118 / 199
(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)
Brian C. McNeil

Mailing Address 1359 Shady Knoll Ct

City State Zip Code
Longwood FL 32750

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Senior Account Manager
CO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-5670-12-36

Amount of Each Receipt this Period
10.00

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

Mailing Address 925 S. Main Street, Apt 3334

City State Zip Code
Grapevine TX 76051

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Senior Account Manager
CO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-6650-11-47

Amount of Each Receipt this Period
10.00

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

Mailing Address 925 S. Main Street, Apt 3334

City State Zip Code
Grapevine TX 76051

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Senior Account Manager
CO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-6642-12-36

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 199
(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)
Nancy A. Miley

Mailing Address 2961 Ned Shelton Rd

City State Zip Code
Nashville TN 37217

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Sales Administration Senior Spec
CO

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-12529-11-47

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Nancy A. Miley

Mailing Address 2961 Ned Shelton Rd

City State Zip Code
Nashville TN 37217

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Sales Administration Senior Spec
CO

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-12513-12-36

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Christopher L. Miller

Mailing Address 2530 Allegheny Dr

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Contract Specialist
CO

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-6414-11-47

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 / 199
	<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) Christopher L. Miller	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 2530 Allegheny Dr	Transaction ID: 20091027-6407-12-36
	City State Zip Code Chattanooga TN 37421	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE Contract Specialist CO 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) Ronald E. Miller	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 1034 Reunion Drive	Transaction ID: 20091013-6176-11-47
	City State Zip Code Chattanooga TN 37421	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE Claims Senior Director CO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Ronald E. Miller	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 1034 Reunion Drive	Transaction ID: 20091027-6170-12-36
	City State Zip Code Chattanooga TN 37421	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE Claims Senior Director CO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 199
(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)
Morris D. Mirabella

Mailing Address 5820 Aventura Ct

City Tampa State FL Zip Code 33625

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-8459-11-3
Amount of Each Receipt this Period: 15.00

B. Full Name (Last, First, Middle Initial)
Morris D. Mirabella

Mailing Address 5820 Aventura Ct

City Tampa State FL Zip Code 33625

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-8432-11-47
Amount of Each Receipt this Period: 15.00

C. Full Name (Last, First, Middle Initial)
Morris D. Mirabella

Mailing Address 5820 Aventura Ct

City Tampa State FL Zip Code 33625

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-8426-12-36
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 122 / 199
(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		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 520 SE 5th Avenue		Transaction ID: 20090929-5556-11-3
City Ft. Lauderdale	State FL	Zip Code 33301
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 Account Manager-National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

B.

Full Name (Last, First, Middle Initial) Kymberly P. Miranda		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 520 SE 5th Avenue		Transaction ID: 20091013-5533-11-47
City Ft. Lauderdale	State FL	Zip Code 33301
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 Account Manager-National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

C.

Full Name (Last, First, Middle Initial) Kymberly P. Miranda		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 520 SE 5th Avenue		Transaction ID: 20091027-5527-12-36
City Ft. Lauderdale	State FL	Zip Code 33301
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 Account Manager-National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 199

(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)
Jodie K. Mirfendereski
Mailing Address 104 Glenlivet PI

City State Zip Code
Powell OH 43065

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.14

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-4732-11-3

Amount of Each Receipt this Period

10.91

B.

Full Name (Last, First, Middle Initial)
Jodie K. Mirfendereski
Mailing Address 104 Glenlivet PI

City State Zip Code
Powell OH 43065

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.14

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-4712-11-47

Amount of Each Receipt this Period

10.91

C.

Full Name (Last, First, Middle Initial)
Jodie K. Mirfendereski
Mailing Address 104 Glenlivet PI

City State Zip Code
Powell OH 43065

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

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.14

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-4706-12-36

Amount of Each Receipt this Period

10.91

SUBTOTAL of Receipts This Page (optional)

32.73

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 124 / 199
(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)
Melanie N. Monchick

Mailing Address 103 Loch Haven Ln

City Cary State NC Zip Code 27518

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

Name of Employer: INT'L REHAB. ASSOCIATES, INC. Occupation: Clinical Program Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 15 / 2009

Transaction ID: 20091013-8090-11-47

Amount of Each Receipt this Period: 10.00

B.

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

Mailing Address 103 Loch Haven Ln

City Cary State NC Zip Code 27518

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

Name of Employer: INT'L REHAB. ASSOCIATES, INC. Occupation: Clinical Program Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 29 / 2009

Transaction ID: 20091027-8084-12-36

Amount of Each Receipt this Period: 10.00

C.

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

Mailing Address 11835 Wildwood Springs Dr

City Roswell State GA Zip Code 30075

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 ▼ 220.00

Date of Receipt: 10 / 15 / 2009

Transaction ID: 20091013-2564-11-47

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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

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

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

FOR LINE NUMBER: PAGE 125 / 199
(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)
Kenneth W. Munkel

Mailing Address 11835 Wildwood Springs Dr

City State Zip Code
Roswell GA 30075

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Senior Account Manager
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-2560-12-36

Amount of Each Receipt this Period
10.00

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 ▼ 2200.00

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

Transaction ID: 20090929-13173-11-3

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 ▼ 2200.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-13121-11-47

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **210.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 199
(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)
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 ▼ 2200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-13104-12-36

Amount of Each Receipt this Period
100.00

B.

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

Mailing Address 1449 Canal Point Rd

City State Zip Code
Longwood FL 32750

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Manager Account Management

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-10304-11-3

Amount of Each Receipt this Period
12.00

C.

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

Mailing Address 1449 Canal Point Rd

City State Zip Code
Longwood FL 32750

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Manager Account Management

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-10265-11-47

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional) ▶

124.00

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 127 / 199
	<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) John M. Murphy	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	Mailing Address 1449 Canal Point Rd	Transaction ID: 20091027-10255-12-36
	City State Zip Code Longwood FL 32750	Amount of Each Receipt this Period 12.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Manager Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

B.	Full Name (Last, First, Middle Initial) Paula Murphy	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 9
	Mailing Address 11 Dally Farms Rd	Transaction ID: 20090929-5506-11-3
	City State Zip Code Windsor CT 06095	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Project Management Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.	Full Name (Last, First, Middle Initial) Paula Murphy	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9
	Mailing Address 11 Dally Farms Rd	Transaction ID: 20091013-5483-11-47
	City State Zip Code Windsor CT 06095	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Project Management Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)	▶	42.00
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 128 / 199
(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) Paula Murphy		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 11 Dally Farms Rd		Transaction ID: 20091027-5477-12-36
City Windsor	State Zip Code CT 06095	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Project Management Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

B.

Full Name (Last, First, Middle Initial) Noreen Nageotte		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 28205 W Oviatt Rd		Transaction ID: 20091013-9000-11-47
City Bay Village	State Zip Code OH 44140	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.

Full Name (Last, First, Middle Initial) Noreen Nageotte		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 28205 W Oviatt Rd		Transaction ID: 20091027-8994-12-36
City Bay Village	State Zip Code OH 44140	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 / 199
	<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) Van A. Nelimark	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 2120 Sw 52nd Ave	Transaction ID: 20091013-4557-11-47
	City State Zip Code Plantation FL 33317	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA DENTAL HEALTH OF FL, INC Dentist 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) Van A. Nelimark	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 2120 Sw 52nd Ave	Transaction ID: 20091027-4551-12-36
	City State Zip Code Plantation FL 33317	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA DENTAL HEALTH OF FL, INC Dentist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Daniel Nicoll	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 4 Bayview Dr	Transaction ID: 20090929-2334-11-3
	City State Zip Code Plainview NY 11803	Amount of Each Receipt this Period 26.93
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Medical Senior Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 592.46	

SUBTOTAL of Receipts This Page (optional)	▶	46.93
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 130 / 199
(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)
Daniel Nicoll

Mailing Address 4 Bayview Dr

City State Zip Code
Plainview NY 11803

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 592.46

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-2325-11-47

Amount of Each Receipt this Period
26.93

B.

Full Name (Last, First, Middle Initial)
Daniel Nicoll

Mailing Address 4 Bayview Dr

City State Zip Code
Plainview NY 11803

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 592.46

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: 20091027-2321-12-36

Amount of Each Receipt this Period
26.93

C.

Full Name (Last, First, Middle Initial)
Eliana Nunez

Mailing Address 120 Ridge Crest Cir

City State Zip Code
Wethersfield CT 06109

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Project Management Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 344.21

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: 20090929-1385-11-3

Amount of Each Receipt this Period
15.63

SUBTOTAL of Receipts This Page (optional) ► 69.49

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 131 / 199
(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)
Eliana Nunez

Mailing Address 120 Ridge Crest Cir

City State Zip Code
Wethersfield CT 06109

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Project Management Senior Director
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 344.21

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-1380-11-47

Amount of Each Receipt this Period

15.63

B.

Full Name (Last, First, Middle Initial)
Eliana Nunez

Mailing Address 120 Ridge Crest Cir

City State Zip Code
Wethersfield CT 06109

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Project Management Senior Director
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 344.21

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-1379-12-36

Amount of Each Receipt this Period

15.63

C.

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

Mailing Address 2101 Sea Eagle View

City State Zip Code
Austin TX 78738

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

Name of Employer Occupation
CIGNA CORPORATION Government Affairs Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1015.30

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-16554-11-3

Amount of Each Receipt this Period

46.15

SUBTOTAL of Receipts This Page (optional)

77.41

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 132 / 199
(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)
John Oates

Mailing Address 2101 Sea Eagle View

City State Zip Code
Austin TX 78738

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

Name of Employer Occupation
CIGNA CORPORATION Government Affairs Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1015.30

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-16479-11-47

Amount of Each Receipt this Period
46.15

B.

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

Mailing Address 2101 Sea Eagle View

City State Zip Code
Austin TX 78738

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

Name of Employer Occupation
CIGNA CORPORATION Government Affairs Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1015.30

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-16445-12-36

Amount of Each Receipt this Period
46.15

C.

Full Name (Last, First, Middle Initial)
Katherine Overbye

Mailing Address 995 Hopmeadow St

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 Underwriting Senior Director

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-1595-11-47

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)

102.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 199
(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)
Katherine Overbye

Mailing Address 995 Hopmeadow St

City State Zip Code
Simsbury CT 06070

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-1593-12-36

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Eric P. Palmer

Mailing Address 42 Ridgeview Drive

City State Zip Code
Ellington CT 06029

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

Name of Employer Occupation
CIGNA CORPORATION Actuarial Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-7301-11-47

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Eric P. Palmer

Mailing Address 42 Ridgeview Drive

City State Zip Code
Ellington CT 06029

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

Name of Employer Occupation
CIGNA CORPORATION Actuarial Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-7293-12-36

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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

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

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

FOR LINE NUMBER: PAGE 134 / 199
(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)
Stephen C. Parham
Mailing Address 201 Willoughby Blvd.
City Greensboro State NC Zip Code 27408
FEC ID number of contributing federal political committee. **C**
Name of Employer CIGNA CORPORATION Occupation Sales Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 10 / 01 / 2009
Transaction ID: 20090929-12090-11-3
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Stephen C. Parham
Mailing Address 201 Willoughby Blvd.
City Greensboro State NC Zip Code 27408
FEC ID number of contributing federal political committee. **C**
Name of Employer CIGNA CORPORATION Occupation Sales Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-12042-11-47
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Stephen C. Parham
Mailing Address 201 Willoughby Blvd.
City Greensboro State NC Zip Code 27408
FEC ID number of contributing federal political committee. **C**
Name of Employer CIGNA CORPORATION Occupation Sales Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 10 / 29 / 2009
Transaction ID: 20091027-12028-12-36
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: (check only one)	PAGE 135 / 199
	<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) Charlene Parsons		Date of Receipt
	Mailing Address 1179 Colts Ln		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090929-13667-11-3
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" value="90.00"/>
		<input type="text" value="1980.00"/>	

B.	Full Name (Last, First, Middle Initial) Charlene Parsons		Date of Receipt
	Mailing Address 1179 Colts Ln		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-13614-11-47
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" value="90.00"/>
		<input type="text" value="1980.00"/>	

C.	Full Name (Last, First, Middle Initial) Charlene Parsons		Date of Receipt
	Mailing Address 1179 Colts Ln		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091027-13594-12-36
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" value="90.00"/>
		<input type="text" value="1980.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="270.00"/>
TOTAL 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 136 / 199
(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 A. Parsons

Mailing Address 4 Thistle Hollow

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 Svp Reinsurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-523-11-3

Amount of Each Receipt this Period 40.00

B.

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

Mailing Address 4 Thistle Hollow

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 Svp Reinsurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-521-11-47

Amount of Each Receipt this Period 40.00

C.

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

Mailing Address 4 Thistle Hollow

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 Svp Reinsurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-520-12-36

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 / 199
	<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) Terry Perkins, PA		Date of Receipt	
	Mailing Address 712 N 2nd St		M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: 20091013-7683-11-47
	Avondale	AZ	85323	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		8.66	
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation Physician Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.47		

B.	Full Name (Last, First, Middle Initial) Terry Perkins, PA		Date of Receipt	
	Mailing Address 712 N 2nd St		M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: 20091027-7677-12-36
	Avondale	AZ	85323	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		8.45	
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation Physician Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.47		

C.	Full Name (Last, First, Middle Initial) Raymond H. Perry		Date of Receipt	
	Mailing Address 112 W Walnut Ave		M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: 20090929-2512-11-3
	Moorestown	NJ	08057	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		11.83	
Name of Employer CIGNA CORPORATION		Occupation Financial Analysis Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.36		

SUBTOTAL of Receipts This Page (optional)	▶	28.94
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 138 / 199
(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) Raymond H. Perry		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 112 W Walnut Ave		Transaction ID: 20091013-2502-11-47
City Moorestown	State NJ	Zip Code 08057
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.83
Name of Employer CIGNA CORPORATION	Occupation Financial Analysis Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.36	

B.

Full Name (Last, First, Middle Initial) Raymond H. Perry		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 112 W Walnut Ave		Transaction ID: 20091027-2498-12-36
City Moorestown	State NJ	Zip Code 08057
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.83
Name of Employer CIGNA CORPORATION	Occupation Financial Analysis Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.36	

C.

Full Name (Last, First, Middle Initial) Carol Petren		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 210 W. Washington Square -10SW		Transaction ID: 20090929-16064-11-3
City Philadelphia	State PA	Zip Code 19106-3581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.00
Name of Employer ADM CEO Staff	Occupation E.V.P. Genl Counsel & Pub Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4224.00	

SUBTOTAL of Receipts This Page (optional)	215.66
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 139 / 199
(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		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 210 W. Washington Square -10SW		Transaction ID: 20091013-15996-11-47
City Philadelphia	State PA	Zip Code 19106-3581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.00
Name of Employer ADM CEO Staff	Occupation E.V.P. Genl Counsel & Pub Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4224.00	

B.

Full Name (Last, First, Middle Initial) Carol Petren		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 210 W. Washington Square -10SW		Transaction ID: 20091027-15962-12-36
City Philadelphia	State PA	Zip Code 19106-3581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.00
Name of Employer ADM CEO Staff	Occupation E.V.P. Genl Counsel & Pub Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4224.00	

C.

Full Name (Last, First, Middle Initial) Robert D. Picinich		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 1096 Maple Hill Ln		Transaction ID: 20090929-2457-11-3
City Malvern	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)	399.00
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 140 / 199
(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)
Robert D. Picinich

Mailing Address 1096 Maple Hill Ln

City Malvern State PA Zip Code 19355

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 ▼ 330.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-2447-11-47
Amount of Each Receipt this Period: 15.00

B.

Full Name (Last, First, Middle Initial)
Robert D. Picinich

Mailing Address 1096 Maple Hill Ln

City Malvern State PA Zip Code 19355

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 ▼ 330.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-2443-12-36
Amount of Each Receipt this Period: 15.00

C.

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

Mailing Address 622 Museum Drive

City Charlotte State NC Zip Code 28207

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

Name of Employer: CHC Middle Market Segment
Occupation: General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.06

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-16863-11-3
Amount of Each Receipt this Period: 19.23

SUBTOTAL of Receipts This Page (optional) ► **49.23**

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: PAGE 141 / 199
(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		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 622 Museum Drive		Transaction ID: 20091013-16785-11-47
City Charlotte	State Zip Code NC 28207	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer CHC Middle Market Segment	Occupation General Manager	Aggregate Year-to-Date ▼ 423.06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Charles C. Pitts		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 622 Museum Drive		Transaction ID: 20091027-16748-12-36
City Charlotte	State Zip Code NC 28207	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer CHC Middle Market Segment	Occupation General Manager	Aggregate Year-to-Date ▼ 423.06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Clifford C. Podewell		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 19814 N Desert Song Ct		Transaction ID: 20091013-5207-11-47
City Surprise	State Zip Code AZ 85374	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Internal Medicine	Aggregate Year-to-Date ▼ 220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	48.46
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: (check only one)	PAGE 142 / 199
	<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) Clifford C. Podewell	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	Mailing Address 19814 N Desert Song Ct	Transaction ID: 20091027-5201-12-36
	City State Zip Code Surprise AZ 85374	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC Internal Medicine 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) David M. Porcello	Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 9
	Mailing Address 24 Magnolia Dr	Transaction ID: 20090929-1493-11-3
	City State Zip Code Suffield CT 06078	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 Tax Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00	

C.	Full Name (Last, First, Middle Initial) David M. Porcello	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 9
	Mailing Address 24 Magnolia Dr	Transaction ID: 20091013-1488-11-47
	City State Zip Code Suffield CT 06078	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 Tax Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 143 / 199
(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. 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 ▼ 440.00

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

Transaction ID: 20091027-1487-12-36

Amount of Each Receipt this Period
20.00

B.

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 ▼ 424.25

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

Transaction ID: 20090929-368-11-3

Amount of Each Receipt this Period
19.25

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 ▼ 424.25

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-367-11-47

Amount of Each Receipt this Period
19.25

SUBTOTAL of Receipts This Page (optional) ► 58.50

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 144 / 199
(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 F. Prevost

Mailing Address 13 Deer Run

City Southwick State MA Zip Code 01077

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

Name of Employer CT GENERAL LIFE INSURANCE CO
Occupation Aviation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 424.25

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-367-12-36
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Jodi Prohovsky

Mailing Address 360 W Point Rd

City Tonka Bay State MN Zip Code 55331

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

Name of Employer CIGNA BEHAVIORAL HEALTH, INC.
Occupation General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-2045-11-3
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Jodi Prohovsky

Mailing Address 360 W Point Rd

City Tonka Bay State MN Zip Code 55331

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

Name of Employer CIGNA BEHAVIORAL HEALTH, INC.
Occupation General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-2037-11-47
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: PAGE 145 / 199
(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)
Jodi Prohofsky

Mailing Address 360 W Point Rd

City State Zip Code
Tonka Bay MN 55331

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

Name of Employer
CIGNA BEHAVIORAL HEALTH, INC.

Occupation
General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

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

Transaction ID: 20091027-2034-12-36

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
John F. Rausch

Mailing Address 14615 N 12th St

City State Zip Code
Phoenix AZ 85022

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 ▼
211.64

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-7397-11-47

Amount of Each Receipt this Period
9.62

C.

Full Name (Last, First, Middle Initial)
John F. Rausch

Mailing Address 14615 N 12th St

City State Zip Code
Phoenix AZ 85022

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 ▼
211.64

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

Transaction ID: 20091027-7389-12-36

Amount of Each Receipt this Period
9.62

SUBTOTAL of Receipts This Page (optional) ► **44.24**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 / 199
	<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	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 9
	Mailing Address 622 Georgia Ave # 307	Transaction ID: 20090929-13591-11-3
	City State Zip Code Chattanooga TN 37402	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer: INT'L REHAB. ASSOCIATES, INC. Occupation: Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.50	

B.	Full Name (Last, First, Middle Initial) Michael J. Raybeck	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9
	Mailing Address 622 Georgia Ave # 307	Transaction ID: 20091013-13538-11-47
	City State Zip Code Chattanooga TN 37402	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer: INT'L REHAB. ASSOCIATES, INC. Occupation: Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.50	

C.	Full Name (Last, First, Middle Initial) Michael J. Raybeck	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	Mailing Address 622 Georgia Ave # 307	Transaction ID: 20091027-13519-12-36
	City State Zip Code Chattanooga TN 37402	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer: INT'L REHAB. ASSOCIATES, INC. Occupation: Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.50	

SUBTOTAL of Receipts This Page (optional)	57.75
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 147 / 199		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

A.	Full Name (Last, First, Middle Initial) William J. Reedy		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 1539 E Hackamore St		Transaction ID: 20090929-7232-11-3		
	City Mesa	State AZ	Zip Code 85203	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Urgent Care Physician	Aggregate Year-to-Date 440.00		

B.	Full Name (Last, First, Middle Initial) William J. Reedy		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 1539 E Hackamore St		Transaction ID: 20091013-7210-11-47		
	City Mesa	State AZ	Zip Code 85203	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Urgent Care Physician	Aggregate Year-to-Date 440.00		

C.	Full Name (Last, First, Middle Initial) William J. Reedy		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 1539 E Hackamore St		Transaction ID: 20091027-7202-12-36		
	City Mesa	State AZ	Zip Code 85203	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Urgent Care Physician	Aggregate Year-to-Date 440.00		

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 148 / 199
(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)
Brett A. Reinholz

Mailing Address 360 W Illinois St Apt 3a

City State Zip Code
Chicago IL 60610

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: 20090929-4970-11-3

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Brett A. Reinholz

Mailing Address 360 W Illinois St Apt 3a

City State Zip Code
Chicago IL 60610

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-4949-11-47

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Brett A. Reinholz

Mailing Address 360 W Illinois St Apt 3a

City State Zip Code
Chicago IL 60610

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: 20091027-4943-12-36

Amount of Each Receipt this Period
15.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 / 199
	<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	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 3 Scarborough Farms Rd	Transaction ID: 20090929-748-11-3
	City State Zip Code Simsbury CT 06070	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: Vice President Product Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

B.	Full Name (Last, First, Middle Initial) Thomas B. Richards	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 3 Scarborough Farms Rd	Transaction ID: 20091013-745-11-47
	City State Zip Code Simsbury CT 06070	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: Vice President Product Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

C.	Full Name (Last, First, Middle Initial) Thomas B. Richards	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 3 Scarborough Farms Rd	Transaction ID: 20091027-743-12-36
	City State Zip Code Simsbury CT 06070	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: Vice President Product Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional)	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: (check only one)	PAGE 150 / 199
	<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) Nancy E. Richmond	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 503 Willow Hedge Ct	Transaction ID: 20091013-3654-11-47
	City State Zip Code Monroeville PA 15146	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Clinical Program 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) Nancy E. Richmond	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 503 Willow Hedge Ct	Transaction ID: 20091027-3649-12-36
	City State Zip Code Monroeville PA 15146	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Clinical Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Catherine M. Riley	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 1 Sand Dollar Dr	Transaction ID: 20091013-2412-11-47
	City State Zip Code Isle Of Palms SC 29451	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 151 / 199
(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)
Catherine M. Riley

Mailing Address 1 Sand Dollar Dr

City State Zip Code
Isle Of Palms SC 29451

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-2408-12-36

Amount of Each Receipt this Period
10.00

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 ▼ 2112.00

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

Transaction ID: 20090929-11895-11-3

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 ▼ 2112.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-11845-11-47

Amount of Each Receipt this Period
96.00

SUBTOTAL of Receipts This Page (optional) ► **202.00**

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 152 / 199
(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)
Michael J. Ross

Mailing Address 147 Old Gulph Rd

City Wynnewood State PA Zip Code 19096

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2112.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-11830-12-36

Amount of Each Receipt this Period 96.00

B.

Full Name (Last, First, Middle Initial)
Nancy F. Ruffino

Mailing Address 815 Millbrook Rd

City Middletown State CT Zip Code 06457

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

Name of Employer CIGNA CORPORATION Occupation Accounting Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-1198-11-47

Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
Nancy F. Ruffino

Mailing Address 815 Millbrook Rd

City Middletown State CT Zip Code 06457

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

Name of Employer CIGNA CORPORATION Occupation Accounting Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-1196-12-36

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 116.00

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 153 / 199
(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)
Jean C. Rush

Mailing Address 73 Cidermill Hts

City North Granby State CT Zip Code 06060

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 ▼ 423.50

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-273-11-3

Amount of Each Receipt this Period 19.25

B.

Full Name (Last, First, Middle Initial)
Jean C. Rush

Mailing Address 73 Cidermill Hts

City North Granby State CT Zip Code 06060

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 ▼ 423.50

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-272-11-47

Amount of Each Receipt this Period 19.25

C.

Full Name (Last, First, Middle Initial)
Jean C. Rush

Mailing Address 73 Cidermill Hts

City North Granby State CT Zip Code 06060

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 ▼ 423.50

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-272-12-36

Amount of Each Receipt this Period 19.25

SUBTOTAL of Receipts This Page (optional) ► 57.75

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 154 / 199		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

A.	Full Name (Last, First, Middle Initial) David A. Russell		Date of Receipt	
	Mailing Address 48 Winterset Ln		M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: 20091013-2180-11-47
	Simsbury	CT	06070	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer CIGNA CORPORATION		Occupation Actuarial Senior Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00		

B.	Full Name (Last, First, Middle Initial) David A. Russell		Date of Receipt	
	Mailing Address 48 Winterset Ln		M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: 20091027-2177-12-36
	Simsbury	CT	06070	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer CIGNA CORPORATION		Occupation Actuarial Senior Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00		

C.	Full Name (Last, First, Middle Initial) Thomas M. Sakorafis		Date of Receipt	
	Mailing Address 938 Mcdonald Dr		M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: 20091013-5469-11-47
	Northville	MI	48167	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer CT GENERAL LIFE INSURANCE CO		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		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 / 199
	<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 M. Sakorafis		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 938 Mcdonald Dr		Transaction ID: 20091027-5463-12-36		
	City Northville	State MI	Zip Code 48167	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Account Manager-National Accounts			
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) Richard B. Salmon		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 5 Hawks Rdg		Transaction ID: 20090929-2215-11-3		
	City Avon	State CT	Zip Code 06001	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 660.00			

C.	Full Name (Last, First, Middle Initial) Richard B. Salmon		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 5 Hawks Rdg		Transaction ID: 20091013-2206-11-47		
	City Avon	State CT	Zip Code 06001	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 660.00			

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 156 / 199
(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 B. Salmon

Mailing Address 5 Hawks Rdg

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 Medical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-2203-12-36

Amount of Each Receipt this Period 30.00

B.

Full Name (Last, First, Middle Initial)
David N. Sasportas

Mailing Address 125 Wadhams Rd

City Bloomfield State CT Zip Code 06002

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Project Management Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-454-11-3

Amount of Each Receipt this Period 20.00

C.

Full Name (Last, First, Middle Initial)
David N. Sasportas

Mailing Address 125 Wadhams Rd

City Bloomfield State CT Zip Code 06002

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Project Management Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-453-11-47

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 157 / 199
(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 N. Sasportas		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 125 Wadhams Rd		Transaction ID: 20091027-453-12-36
City Bloomfield	State Zip Code CT 06002	
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 Project Management Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

B.

Full Name (Last, First, Middle Initial) Frank Sataline		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 18 Wyndham Ln		Transaction ID: 20090929-524-11-3
City Farmington	State Zip Code CT 06032	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Vice President Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1870.00	

C.

Full Name (Last, First, Middle Initial) Frank Sataline		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 18 Wyndham Ln		Transaction ID: 20091013-522-11-47
City Farmington	State Zip Code CT 06032	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Vice President Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1870.00	

SUBTOTAL of Receipts This Page (optional)	▶	190.00
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 158 / 199
(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)
Frank Sataline

Mailing Address 18 Wyndham Ln

City State Zip Code
Farmington CT 06032

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Vice President Senior Managing Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1870.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-521-12-36

Amount of Each Receipt this Period
85.00

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 ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-701-11-3

Amount of Each Receipt this Period
25.00

C.

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 ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-698-11-47

Amount of Each Receipt this Period
25.00

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: (check only one)	PAGE 159 / 199
	<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 A. Savino		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 91 Trumbull Ln		Transaction ID: 20091027-696-12-36		
	City South Windsor	State CT	Zip Code 06074	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 550.00			

B.	Full Name (Last, First, Middle Initial) Randy Savona		Date of Receipt MM / DD / YYYY 10 / 15 / 2009		
	Mailing Address 9920 Westcliff Pkwy		Transaction ID: 20091013-12703-11-47		
	City Westminster	State CO	Zip Code 80021	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Sales Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

C.	Full Name (Last, First, Middle Initial) Randy Savona		Date of Receipt MM / DD / YYYY 10 / 29 / 2009		
	Mailing Address 9920 Westcliff Pkwy		Transaction ID: 20091027-12687-12-36		
	City Westminster	State CO	Zip Code 80021	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Sales Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

SUBTOTAL of Receipts This Page (optional)	▶	45.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 160 / 199
(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)
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 AM- Treasury Senior Director
ERICA

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-1575-11-3

Amount of Each Receipt this Period

20.00

B.

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 AM- Treasury Senior Director
ERICA

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-1570-11-47

Amount of Each Receipt this Period

20.00

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 AM- Treasury Senior Director
ERICA

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-1568-12-36

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 161 / 199
(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)
Scott D. Schneider

Mailing Address 34 Burning Tree

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 Operations 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
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-4965-12-36

Amount of Each Receipt this Period
9.50

B. Full Name (Last, First, Middle Initial)
Ralph V. Shapiro

Mailing Address 32 Park Avenue Court #22

City State Zip Code
West Springfield MA 01089

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

Name of Employer Occupation
CIGNA CORPORATION Business Analysis Senior Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-16650-11-47

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Ralph V. Shapiro

Mailing Address 32 Park Avenue Court #22

City State Zip Code
West Springfield MA 01089

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

Name of Employer Occupation
CIGNA CORPORATION Business Analysis Senior Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 20091027-16616-12-36

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 29.50

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 162 / 199
(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 J. Shube

Mailing Address 1975 E. Belleview Ln.

City Greenwood Village State CO Zip Code 80121

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

Name of Employer CGI Sales Occupation Sales Director-Direct Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

Date of Receipt 10 / 01 / 2009
Transaction ID: 20090929-18039-11-3
 Amount of Each Receipt this Period 19.25

B. Full Name (Last, First, Middle Initial)
Richard J. Shube

Mailing Address 1975 E. Belleview Ln.

City Greenwood Village State CO Zip Code 80121

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

Name of Employer CGI Sales Occupation Sales Director-Direct Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

Date of Receipt 10 / 15 / 2009
Transaction ID: 20091013-17952-11-47
 Amount of Each Receipt this Period 19.25

C. Full Name (Last, First, Middle Initial)
Richard J. Shube

Mailing Address 1975 E. Belleview Ln.

City Greenwood Village State CO Zip Code 80121

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

Name of Employer CGI Sales Occupation Sales Director-Direct Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

Date of Receipt 10 / 29 / 2009
Transaction ID: 20091027-17910-12-36
 Amount of Each Receipt this Period 19.25

SUBTOTAL of Receipts This Page (optional) ► 57.75

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 163 / 199		
	<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

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 D. Slice		Date of Receipt
	Mailing Address 19422 N 73rd Ave		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Glendale	AZ	85308
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090929-4390-11-3
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="19.25"/>
		<input type="text" value="423.50"/>	

B.	Full Name (Last, First, Middle Initial) Michael D. Slice		Date of Receipt
	Mailing Address 19422 N 73rd Ave		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Glendale	AZ	85308
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-4373-11-47
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="19.25"/>
		<input type="text" value="423.50"/>	

C.	Full Name (Last, First, Middle Initial) Michael D. Slice		Date of Receipt
	Mailing Address 19422 N 73rd Ave		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Glendale	AZ	85308
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091027-4367-12-36
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="19.25"/>
		<input type="text" value="423.50"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="57.75"/>
TOTAL 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: (check only one)	PAGE 164 / 199
	<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) David B. Smith	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 6268 Dry Canyon Lane	Transaction ID: 20091013-12863-11-47
	City State Zip Code Hixson TN 37343	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE App Development Senior Director CO 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) David B. Smith	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 6268 Dry Canyon Lane	Transaction ID: 20091027-12847-12-36
	City State Zip Code Hixson TN 37343	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE App Development Senior Director CO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) William J. Smith	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 269 Sunnybrook Rd	Transaction ID: 20090929-9033-11-3
	City State Zip Code Springfield PA 19064	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation LIFE INS. CO. OF NORTH AMERICA Business Financial Officer ERICA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00	

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 165 / 199
(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)
William J. Smith

Mailing Address 269 Sunnybrook Rd

City Springfield State PA Zip Code 19064

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

Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Business Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 15 / 2009

Transaction ID: 20091013-9004-11-47

Amount of Each Receipt this Period 50.00

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

Mailing Address 269 Sunnybrook Rd

City Springfield State PA Zip Code 19064

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

Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Business Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 29 / 2009

Transaction ID: 20091027-8998-12-36

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Donald R. Spelhaug

Mailing Address 5710 W Arrowhead Lakes Dr

City Glendale State AZ Zip Code 85308

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 01 / 2009

Transaction ID: 20090929-7294-11-3

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 / 199
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Donald R. Spelhaug	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 5710 W Arrowhead Lakes Dr	Transaction ID: 20091013-7271-11-47
	City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC Family Practice Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00	

B.	Full Name (Last, First, Middle Initial) Donald R. Spelhaug	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 5710 W Arrowhead Lakes Dr	Transaction ID: 20091027-7263-12-36
	City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC Family Practice Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00	

C.	Full Name (Last, First, Middle Initial) Marjorie G. Stein	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 343 Brookway Rd	Transaction ID: 20090929-2327-11-3
	City State Zip Code Merion PA 19066	Amount of Each Receipt this Period 12.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Employee Relations Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 264.00	

SUBTOTAL of Receipts This Page (optional)	52.00
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 167 / 199
(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) Marjorie G. Stein		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9		
	Mailing Address 343 Brookway Rd		Transaction ID: 20091013-2318-11-47		
	City Merion	State PA	Zip Code 19066	Amount of Each Receipt this Period 12.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION		Occupation Employee Relations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 264.00			

B.	Full Name (Last, First, Middle Initial) Marjorie G. Stein		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9		
	Mailing Address 343 Brookway Rd		Transaction ID: 20091027-2314-12-36		
	City Merion	State PA	Zip Code 19066	Amount of Each Receipt this Period 12.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION		Occupation Employee Relations Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 264.00			

C.	Full Name (Last, First, Middle Initial) Jennifer Stepp		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 9		
	Mailing Address 4144 Central Ave		Transaction ID: 20090929-4927-11-3		
	City Indianapolis	State IN	Zip Code 46205	Amount of Each Receipt this Period 6.25	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Senior Account Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 602.69			

SUBTOTAL of Receipts This Page (optional)	▶	30.25
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 168 / 199
	<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) Jennifer Stepp	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 4144 Central Ave	Transaction ID: 20091013-4907-11-47
	City State Zip Code Indianapolis IN 46205	Amount of Each Receipt this Period 6.25
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 602.69	

B.	Full Name (Last, First, Middle Initial) Jennifer Stepp	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 4144 Central Ave	Transaction ID: 20091027-4901-12-36
	City State Zip Code Indianapolis IN 46205	Amount of Each Receipt this Period 84.77
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 602.69	

C.	Full Name (Last, First, Middle Initial) Cathrin Stickney	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 1050 Hyatt Road E	Transaction ID: 20090929-9170-11-3
	City State Zip Code Southold NY 11971	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.50	

SUBTOTAL of Receipts This Page (optional)	110.27
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 169 / 199
(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)
Cathrin Stickney

Mailing Address 1050 Hyatt Road E

City State Zip Code
Southhold NY 11971

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-9139-11-47

Amount of Each Receipt this Period
19.25

B.

Full Name (Last, First, Middle Initial)
Cathrin Stickney

Mailing Address 1050 Hyatt Road E

City State Zip Code
Southhold NY 11971

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

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

Transaction ID: 20091027-9132-12-36

Amount of Each Receipt this Period
19.25

C.

Full Name (Last, First, Middle Initial)
Mark D. Still

Mailing Address 350 Hillside St

City State Zip Code
Yarmouth ME 04096

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Provider Contracting Manager
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-242-11-47

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **48.50**

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 170 / 199
(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)
Mark D. Still

Mailing Address 350 Hillside St

City Yarmouth State ME Zip Code 04096

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Provider Contracting Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-242-12-36
 Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Cheryl L. Studier

Mailing Address 355 Ross Rd

City Mineral Bluff State GA Zip Code 30559

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Account Install Senior Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-5510-11-47
 Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Cheryl L. Studier

Mailing Address 355 Ross Rd

City Mineral Bluff State GA Zip Code 30559

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

Name of Employer: CT GENERAL LIFE INSURANCE CO
Occupation: Account Install Senior Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-5504-12-36
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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

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

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

FOR LINE NUMBER: PAGE 171 / 199
(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)
Daniel M. Sullivan

Mailing Address 108 Governors Way

City State Zip Code
Brentwood TN 37027

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: 20090929-1820-11-3

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Daniel M. Sullivan

Mailing Address 108 Governors Way

City State Zip Code
Brentwood TN 37027

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-1814-11-47

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Daniel M. Sullivan

Mailing Address 108 Governors Way

City State Zip Code
Brentwood TN 37027

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: 20091027-1811-12-36

Amount of Each Receipt this Period
15.00

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

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

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

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

FOR LINE NUMBER: PAGE 172 / 199
(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)
Gregory J. Sullivan

Mailing Address 27 Sunny Heights Rd

City State Zip Code
Granby CT 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 ▼ 440.00

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-13913-11-3
 Amount of Each Receipt this Period: 20.00

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

Mailing Address 27 Sunny Heights Rd

City State Zip Code
Granby CT 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 ▼ 440.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-13858-11-47
 Amount of Each Receipt this Period: 20.00

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

Mailing Address 27 Sunny Heights Rd

City State Zip Code
Granby CT 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 ▼ 440.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-13836-12-36
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 / 199
	<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) Shelly Swinford	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 5 Pinnacle Mountain Rd	Transaction ID: 20090929-4901-11-3
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 16.35
	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 ▼ 360.08	

B.	Full Name (Last, First, Middle Initial) Shelly Swinford	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 5 Pinnacle Mountain Rd	Transaction ID: 20091013-4881-11-47
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 16.35
	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 ▼ 360.08	

C.	Full Name (Last, First, Middle Initial) Shelly Swinford	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 5 Pinnacle Mountain Rd	Transaction ID: 20091027-4875-12-36
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 16.35
	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 ▼ 360.08	

SUBTOTAL of Receipts This Page (optional)	▶	49.05
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 174 / 199
(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)
Jan C. Sykes

Mailing Address 803 W. Mesquite

City State Zip Code
Phoenix AZ 85086

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

Name of Employer Occupation
CIGNA HEALTHCARE OF AZ, INC. Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-10570-11-47

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Jan C. Sykes

Mailing Address 803 W. Mesquite

City State Zip Code
Phoenix AZ 85086

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

Name of Employer Occupation
CIGNA HEALTHCARE OF AZ, INC. Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: 20091027-10560-12-36

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Taghi Tavassoli

Mailing Address 5839 E Sanna St

City State Zip Code
Paradise Valley AZ 85253

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

Name of Employer Occupation
CIGNA HEALTHCARE OF AZ, INC. Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-5568-11-47

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 175 / 199
(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)
Taghi Tavassoli

Mailing Address 5839 E Sanna St

City State Zip Code
Paradise Valley AZ 85253

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

Name of Employer
CIGNA HEALTHCARE OF AZ, INC

Occupation
Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-5562-12-36

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Jeff S. Terrill

Mailing Address 9556 E Cortez St

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Rvp Segment Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-9801-11-3

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Jeff S. Terrill

Mailing Address 9556 E Cortez St

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Rvp Segment Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-9768-11-47

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 176 / 199
(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)
Jeff S. Terrill

Mailing Address 9556 E Cortez St

City State Zip Code
Scottsdale AZ 85260

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 ▼ 440.00

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

Transaction ID: 20091027-9759-12-36

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey Thackeray

Mailing Address 1334 Holly Hill Drive

City State Zip Code
Franklin TN 37064

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Manager Account Management
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 287.75

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

Transaction ID: 20090929-231-11-3

Amount of Each Receipt this Period
9.15

C.

Full Name (Last, First, Middle Initial)
Jeffrey Thackeray

Mailing Address 1334 Holly Hill Drive

City State Zip Code
Franklin TN 37064

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Manager Account Management
CO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 287.75

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-230-11-47

Amount of Each Receipt this Period
9.15

SUBTOTAL of Receipts This Page (optional) ► **38.30**

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

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

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

FOR LINE NUMBER: PAGE 177 / 199
(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)
Jeffrey Thackeray

Mailing Address 1334 Holly Hill Drive

City State Zip Code
Franklin TN 37064

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Manager Account Management
CO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 287.75

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

Transaction ID: 20091027-230-12-36

Amount of Each Receipt this Period
9.15

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

Mailing Address 334 E Orange Dr

City State Zip Code
Phoenix AZ 85012

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Senior Sales Representative
CO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

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

Transaction ID: 20090929-7576-11-3

Amount of Each Receipt this Period
20.00

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

Mailing Address 334 E Orange Dr

City State Zip Code
Phoenix AZ 85012

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Senior Sales Representative
CO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-7553-11-47

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **49.15**

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 178 / 199
(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)
Timothy M. Thomas

Mailing Address 334 E Orange Dr

City State Zip Code
Phoenix AZ 85012

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Senior Sales Representative
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-7546-12-36

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Gary A. Thompson

Mailing Address 16556 Brookhollow Drive

City State Zip Code
Noblesville IN 46062

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

Name of Employer Occupation
CIGNA CORPORATION Sales Manager

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-15769-11-47

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Gary A. Thompson

Mailing Address 16556 Brookhollow Drive

City State Zip Code
Noblesville IN 46062

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

Name of Employer Occupation
CIGNA CORPORATION Sales Manager

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-15736-12-36

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 179 / 199
(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)
Jeffrey E. Tindall
Mailing Address 47 Owens Brook Blvd
City State Zip Code
Simsbury CT 06070
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CIGNA CORPORATION Government Affairs Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 9
Transaction ID: 20090929-14194-11-3
Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Jeffrey E. Tindall
Mailing Address 47 Owens Brook Blvd
City State Zip Code
Simsbury CT 06070
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CIGNA CORPORATION Government Affairs Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9
Transaction ID: 20091013-14136-11-47
Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Jeffrey E. Tindall
Mailing Address 47 Owens Brook Blvd
City State Zip Code
Simsbury CT 06070
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CIGNA CORPORATION Government Affairs Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9
Transaction ID: 20091027-14114-12-36
Amount of Each Receipt this Period
20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 / 199
	<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) Nancy Tucker	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 522 E Commerce St	Transaction ID: 20090929-5539-11-3
	City State Zip Code Milford MI 48381	Amount of Each Receipt this Period 6.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: Senior Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 251.04	

B.	Full Name (Last, First, Middle Initial) Nancy Tucker	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 522 E Commerce St	Transaction ID: 20091013-5516-11-47
	City State Zip Code Milford MI 48381	Amount of Each Receipt this Period 6.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: Senior Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 251.04	

C.	Full Name (Last, First, Middle Initial) Nancy Tucker	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 522 E Commerce St	Transaction ID: 20091027-5510-12-36
	City State Zip Code Milford MI 48381	Amount of Each Receipt this Period 20.39
	FEC ID number of contributing federal political committee. C	
	Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: Senior Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 251.04	

SUBTOTAL of Receipts This Page (optional)	▶	32.89
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 181 / 199
	<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) Joseph E. Turgeon	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 15 Lyman Rd	Transaction ID: 20090929-13732-11-3
	City State Zip Code Bolton CT 06043	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

B.	Full Name (Last, First, Middle Initial) Joseph E. Turgeon	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 15 Lyman Rd	Transaction ID: 20091013-13678-11-47
	City State Zip Code Bolton CT 06043	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.	Full Name (Last, First, Middle Initial) Joseph E. Turgeon	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 15 Lyman Rd	Transaction ID: 20091027-13657-12-36
	City State Zip Code Bolton CT 06043	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)	▶	45.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 182 / 199
(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) Amy J. Turkington		Date of Receipt
	Mailing Address 38901 Detroit Road		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Avon	State OH	Zip Code 44011
	FEC ID number of contributing federal political committee. C <input type="text"/>		Transaction ID: 20091013-4641-11-47
	Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Communications Director I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>

B.	Full Name (Last, First, Middle Initial) Amy J. Turkington		Date of Receipt
	Mailing Address 38901 Detroit Road		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Avon	State OH	Zip Code 44011
	FEC ID number of contributing federal political committee. C <input type="text"/>		Transaction ID: 20091027-4635-12-36
	Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Communications Director I
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>

C.	Full Name (Last, First, Middle Initial) Julie Vaclavik		Date of Receipt
	Mailing Address 3911 Bellinger Way		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Missouri City	State TX	Zip Code 77459
	FEC ID number of contributing federal political committee. C <input type="text"/>		Transaction ID: 20091013-10181-11-47
	Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Quality Review/Audit Manager
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"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30.00"/>
TOTAL 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 183 / 199
(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)
Julie Vaclavik

Mailing Address 3911 Bellinger Way

City State Zip Code
Missouri City TX 77459

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Quality Review/Audit Manager

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-10171-12-36

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Katharine L. Wade

Mailing Address 3 East Weatogue Strret

City State Zip Code
Simsbury CT 06070

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 ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 9

Transaction ID: 20090929-813-11-3

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Katharine L. Wade

Mailing Address 3 East Weatogue Strret

City State Zip Code
Simsbury CT 06070

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 ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-809-11-47

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 / 199
	<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) Katharine L. Wade	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 3 East Weatogue Strret	Transaction ID: 20091027-806-12-36
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Compliance Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

B.	Full Name (Last, First, Middle Initial) Michael T. Wade	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 3 E Weatogue St	Transaction ID: 20091013-11056-11-47
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Senior Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Michael T. Wade	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 3 E Weatogue St	Transaction ID: 20091027-11044-12-36
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Senior Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 185 / 199
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A.	Full Name (Last, First, Middle Initial) Brian Wallach		Date of Receipt
	Mailing Address 1409 Vassar St		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77006
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090929-9058-11-3
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Provider Contracting 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="658.46"/>	<input type="text" value="29.93"/>

B.	Full Name (Last, First, Middle Initial) Brian Wallach		Date of Receipt
	Mailing Address 1409 Vassar St		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77006
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091013-9028-11-47
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Provider Contracting 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="658.46"/>	<input type="text" value="29.93"/>

C.	Full Name (Last, First, Middle Initial) Brian Wallach		Date of Receipt
	Mailing Address 1409 Vassar St		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77006
	FEC ID number of contributing federal political committee. C		Transaction ID: 20091027-9022-12-36
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Provider Contracting 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="658.46"/>	<input type="text" value="29.93"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="89.79"/>
TOTAL 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 186 / 199
(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)
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 ▼ 440.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: 20090929-11122-11-3

Amount of Each Receipt this Period
20.00

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 ▼ 440.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 20091013-11077-11-47

Amount of Each Receipt this Period
20.00

C.

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 ▼ 440.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: 20091027-11064-12-36

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 187 / 199
(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)
Joseph Wankerl

Mailing Address 514 Mount Vernon Rd

City State Zip Code
Plantsville CT 06479

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Provider Contracting Manager
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 222.20

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

Transaction ID: 20090929-10734-11-3

Amount of Each Receipt this Period
10.10

B.

Full Name (Last, First, Middle Initial)
Joseph Wankerl

Mailing Address 514 Mount Vernon Rd

City State Zip Code
Plantsville CT 06479

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Provider Contracting Manager
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 222.20

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-10693-11-47

Amount of Each Receipt this Period
10.10

C.

Full Name (Last, First, Middle Initial)
Joseph Wankerl

Mailing Address 514 Mount Vernon Rd

City State Zip Code
Plantsville CT 06479

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE Provider Contracting Manager
CO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 222.20

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

Transaction ID: 20091027-10683-12-36

Amount of Each Receipt this Period
10.10

SUBTOTAL of Receipts This Page (optional) ► **30.30**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 188 / 199
(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)
John Watson

Mailing Address 215 Elm St

City Noank State CT Zip Code 06340

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

Name of Employer CIGNA CORPORATION Occupation Business Project Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-15142-11-3
 Amount of Each Receipt this Period: 2.00

B.

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

Mailing Address 215 Elm St

City Noank State CT Zip Code 06340

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

Name of Employer CIGNA CORPORATION Occupation Business Project Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-15081-11-47
 Amount of Each Receipt this Period: 2.00

C.

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

Mailing Address 215 Elm St

City Noank State CT Zip Code 06340

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

Name of Employer CIGNA CORPORATION Occupation Business Project Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-15052-12-36
 Amount of Each Receipt this Period: 2.00

SUBTOTAL of Receipts This Page (optional) ► **6.00**

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 189 / 199
(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 D. Watson		Date of Receipt MM / DD / YYYY 10 / 01 / 2009
Mailing Address 1813 Shadywood Ct		Transaction ID: 20090929-5345-11-3
City Chesterfield	State MO	Zip Code 63017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 858.95	

B.

Full Name (Last, First, Middle Initial) Scott D. Watson		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 1813 Shadywood Ct		Transaction ID: 20091013-5323-11-47
City Chesterfield	State MO	Zip Code 63017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 858.95	

C.

Full Name (Last, First, Middle Initial) Scott D. Watson		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 1813 Shadywood Ct		Transaction ID: 20091027-5317-12-36
City Chesterfield	State MO	Zip Code 63017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.35
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 858.95	

SUBTOTAL of Receipts This Page (optional)	▶	49.05
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 190 / 199
(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)
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 ▼ 440.00

Date of Receipt: 10 / 01 / 2009
Transaction ID: 20090929-13642-11-3
 Amount of Each Receipt this Period: 20.00

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 ▼ 440.00

Date of Receipt: 10 / 15 / 2009
Transaction ID: 20091013-13589-11-47
 Amount of Each Receipt this Period: 20.00

C.

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 ▼ 440.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: 20091027-13569-12-36
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 191 / 199
(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 M. White

Mailing Address 68 Longwood Dr

City State Zip Code
Portland ME 04102

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

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

Transaction ID: 20090929-2185-11-3

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Richard M. White

Mailing Address 68 Longwood Dr

City State Zip Code
Portland ME 04102

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-2176-11-47

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Richard M. White

Mailing Address 68 Longwood Dr

City State Zip Code
Portland ME 04102

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

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

Transaction ID: 20091027-2173-12-36

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 / 199
	<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) Deborah B. Wiacek	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 106 High Valley Dr	Transaction ID: 20091013-795-11-47
	City State Zip Code Canton CT 06019	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Alt Inv Senior Managing 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) Deborah B. Wiacek	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 106 High Valley Dr	Transaction ID: 20091027-792-12-36
	City State Zip Code Canton CT 06019	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Alt Inv Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Lance Wilkes	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 21 Arlington Drive	Transaction ID: 20090929-10090-11-3
	City State Zip Code Avon CT 06001	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Financial Strategy Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 / 199		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

A.	Full Name (Last, First, Middle Initial) Lance Wilkes		Date of Receipt																					
	Mailing Address 21 Arlington Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	5		2	0	0	9														
	City Avon State CT Zip Code 06001		Transaction ID: 20091013-10054-11-47																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
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 ▼ 440.00		<table border="1"> <tr> <td colspan="10">20.00</td> </tr> </table>		20.00																				
20.00																								

B.	Full Name (Last, First, Middle Initial) Lance Wilkes		Date of Receipt																					
	Mailing Address 21 Arlington Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	9		2	0	0	9														
	City Avon State CT Zip Code 06001		Transaction ID: 20091027-10044-12-36																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
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 ▼ 440.00		<table border="1"> <tr> <td colspan="10">20.00</td> </tr> </table>		20.00																				
20.00																								

C.	Full Name (Last, First, Middle Initial) Eric Witherspoon		Date of Receipt																					
	Mailing Address 509 Barrington Rd		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		0	1		2	0	0	9														
	City Signal Mountain State TN Zip Code 37377		Transaction ID: 20090929-6358-11-3																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: Underwriting Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00		<table border="1"> <tr> <td colspan="10">15.00</td> </tr> </table>		15.00																				
15.00																								

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>55.00</td></tr></table>	55.00
55.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 / 199
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Eric Witherspoon	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 509 Barrington Rd	Transaction ID: 20091013-6335-11-47
	City State Zip Code Signal Mountain TN 37377	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Underwriting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

B.	Full Name (Last, First, Middle Initial) Eric Witherspoon	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 509 Barrington Rd	Transaction ID: 20091027-6328-12-36
	City State Zip Code Signal Mountain TN 37377	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Underwriting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.	Full Name (Last, First, Middle Initial) Martha M. Wood	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 1304 Delaware Ave Apt 5	Transaction ID: 20091013-2855-11-47
	City State Zip Code Wilmington DE 19806	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Business Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 195 / 199
(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)
Martha M. Wood

Mailing Address 1304 Delaware Ave Apt 5

City State Zip Code
Wilmington DE 19806

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AMERICA Business Project Manager

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

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

Transaction ID: 20091027-2851-12-36

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Bu Yang

Mailing Address 121 High Wood Dr

City State Zip Code
South Glastonbury CT 06073

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 465.30

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

Transaction ID: 20090929-9767-11-3

Amount of Each Receipt this Period
21.15

C.

Full Name (Last, First, Middle Initial)
Bu Yang

Mailing Address 121 High Wood Dr

City State Zip Code
South Glastonbury CT 06073

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 465.30

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-9734-11-47

Amount of Each Receipt this Period
21.15

SUBTOTAL of Receipts This Page (optional) ► **52.30**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 / 199
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Bu Yang	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 121 High Wood Dr	Transaction ID: 20091027-9725-12-36
	City State Zip Code South Glastonbury CT 06073	Amount of Each Receipt this Period 21.15
	FEC ID number of contributing federal political committee. C	
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 ▼ 465.30	

B.	Full Name (Last, First, Middle Initial) John Young	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 18420 29th Avenue North	Transaction ID: 20090929-15790-11-3
	City State Zip Code Plymouth MN 55447	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
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 ▼ 440.00	

C.	Full Name (Last, First, Middle Initial) John Young	Date of Receipt MM / DD / YYYY 10 / 15 / 2009
	Mailing Address 18420 29th Avenue North	Transaction ID: 20091013-15723-11-47
	City State Zip Code Plymouth MN 55447	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
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 ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	61.15
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 197 / 199
(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)
John Young

Mailing Address 18420 29th Avenue North

City State Zip Code
Plymouth MN 55447

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

Name of Employer Occupation
CHC Middle Market Sales Account Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-15690-12-36

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 5 Frost Rd

City State Zip Code
Cinnaminson NJ 08077

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AM-ERICA Operations Senior Director

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 20091013-3465-11-47

Amount of Each Receipt this Period
10.00

C.

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

Mailing Address 5 Frost Rd

City State Zip Code
Cinnaminson NJ 08077

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AM-ERICA Operations Senior Director

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 20091027-3460-12-36

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶

40.00

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

13679.32

**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 198 / 199

<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

A.	Full Name (Last, First, Middle Initial) Lisa Murkowski for US Senate		Transaction ID: 57095E9F2251EFB4D4C	
	Mailing Address PO Box 100847		Date of Disbursement 10 / 08 / 2009	
City Anchorage		State AK	Zip Code 99510	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement 2010 Primary			011 Category/ Type	
Candidate Name Lisa A. Murkowski		Disbursement For: 2010		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AK District:				

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

2500.00

**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 199 / 199

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

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

A.

Full Name (Last, First, Middle Initial)
Jim Pitts Campaign

Transaction ID: 25606F44B347B068E5A

Date of Disbursement

Mailing Address 310 West Jefferson
Suite Two

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	9

City Waxahachie State TX Zip Code 75165

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Nonfederal Contribution

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1000.00
