

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00217216  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (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 08 01 2008 through 08 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer John Ruhlmann  
Signature of Treasurer Electronically Filed by John Ruhlmann Date 09 15 2008

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**

FEC Form 3X (Rev. 02/2003)

Page 2

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

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		119223.96
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	124786.08									
(c) Total Receipts (from Line 19) .....	3303.16	33865.28								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	128089.24	153089.24								
7. Total Disbursements (from Line 31) .....	2500.00	27500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	125589.24	125589.24								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	3059.16	23760.85
(i) Itemized (use Schedule A) .....	244.00	10104.43
(ii) Unitemized .....	3303.16	33865.28
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	3303.16	33865.28
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)) .....	3303.16	33865.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3303.16	33865.28

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	22500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	2000.00	5000.00
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))..	2500.00	27500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	27500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	3303.16	33865.28
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3303.16	33865.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Bahr</p> <p>Mailing Address 4669 W. Vista Drive</p> <p>City Highland State UT Zip Code 84003</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Coventry Health Care Inc. Occupation Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">750.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 08 / 2008</span></p> <p><b>Transaction ID:</b> A2008-1605759</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Michael Bahr</p> <p>Mailing Address 4669 W. Vista Drive</p> <p>City Highland State UT Zip Code 84003</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Coventry Health Care Inc. Occupation Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">800.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 22 / 2008</span></p> <p><b>Transaction ID:</b> A2008-1752641</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Mary Baranowski</p> <p>Mailing Address 4885 Brighton Court</p> <p>City Granite Bay State CA Zip Code 95746</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Coventry Health Care Inc. Occupation Assistant Vice President</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">576.90</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 08 / 2008</span></p> <p><b>Transaction ID:</b> A2008-1605744</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">38.46</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">138.46</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 7 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

**A.** Full Name (Last, First, Middle Initial)  
Mary Baranowski

Mailing Address 4885 Brighton Court

City State Zip Code  
Granite Bay CA 95746

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation Assistant Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.36

Date of Receipt 08 / 22 / 2008  
**Transaction ID:** A2008-1752626  
 Amount of Each Receipt this Period 38.46

**B.** Full Name (Last, First, Middle Initial)  
Richard Bates

Mailing Address 12205 Scarlet Tanager Drive

City State Zip Code  
Potomac MD 20854

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 08 / 2008  
**Transaction ID:** A2008-1605767  
 Amount of Each Receipt this Period 60.00

**C.** Full Name (Last, First, Middle Initial)  
Richard Bates

Mailing Address 12205 Scarlet Tanager Drive

City State Zip Code  
Potomac MD 20854

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt 08 / 22 / 2008  
**Transaction ID:** A2008-1752649  
 Amount of Each Receipt this Period 60.00

**SUBTOTAL** of Receipts This Page (optional) ..... 158.46

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dale Blecher</p> <p>Mailing Address 10020 Bellona Court</p> <p>City Richmond State VA Zip Code 23233</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Coventry Health Care Inc. Occupation Systems Analyst</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 08 / 2008</span></p> <p><b>Transaction ID:</b> A2008-1605740</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Dale Blecher</p> <p>Mailing Address 10020 Bellona Court</p> <p>City Richmond State VA Zip Code 23233</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Coventry Health Care Inc. Occupation Systems Analyst</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">320.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 22 / 2008</span></p> <p><b>Transaction ID:</b> A2008-1752622</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Edward Borovatz</p> <p>Mailing Address 14742 Rolling Spring Drive Apt #207-5</p> <p>City Midlothian State VA Zip Code 23114</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Coventry Health Care Inc. Occupation Vice President</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">495.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 08 / 2008</span></p> <p><b>Transaction ID:</b> A2008-1605732</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">35.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">75.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 9 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

**A.** Full Name (Last, First, Middle Initial)  
Edward Borovatz

Mailing Address 14742 Rolling Spring Drive  
Apt #207-5

City Midlothian State VA Zip Code 23114

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 530.00

Date of Receipt 08 / 22 / 2008  
Transaction ID: A2008-1752614  
Amount of Each Receipt this Period 35.00

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

Mailing Address 330 West Meadow Drive

City Mechanicsburg State PA Zip Code 17055

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 08 / 2008  
Transaction ID: A2008-1605760  
Amount of Each Receipt this Period 40.00

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

Mailing Address 330 West Meadow Drive

City Mechanicsburg State PA Zip Code 17055

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt 08 / 22 / 2008  
Transaction ID: A2008-1752642  
Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... 115.00

**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 10 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)  
Coventry Health Care Inc - First Health Group PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles Byrd, Jr.		Date of Receipt	
	Mailing Address 9131 Carterham Road		M M / D D / Y Y Y Y Y 0 8 / 0 8 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-1605756
	Richmond	VA	23229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		38.47	
Name of Employer Coventry Health Care Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		577.05		

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Byrd, Jr.		Date of Receipt	
	Mailing Address 9131 Carterham Road		M M / D D / Y Y Y Y Y 0 8 / 2 2 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-1752638
	Richmond	VA	23229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		38.47	
Name of Employer Coventry Health Care Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		615.52		

<b>C.</b>	Full Name (Last, First, Middle Initial) Catherine Cozzi		Date of Receipt	
	Mailing Address 25002 W. Mary Lane		M M / D D / Y Y Y Y Y 0 8 / 0 8 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-1605731
	Plainfield	IL	60544	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		20.00	
Name of Employer Coventry Health Care Inc.		Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	96.94
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)  
Coventry Health Care Inc - First Health Group PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Catherine Cozzi	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 25002 W. Mary Lane	<b>Transaction ID:</b> A2008-1752613
	City State Zip Code Plainfield IL 60544	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Coventry Health Care Inc. Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) E. Pauline Degenfelder	Date of Receipt MM / DD / YYYY 08 / 08 / 2008
	Mailing Address 3103 Morlen Road	<b>Transaction ID:</b> A2008-1605754
	City State Zip Code Shaker Heights OH 44122	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Coventry Health Care Inc. Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) E. Pauline Degenfelder	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 3103 Morlen Road	<b>Transaction ID:</b> A2008-1752636
	City State Zip Code Shaker Heights OH 44122	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Coventry Health Care Inc. Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 35  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial) Alan Dileo		Date of Receipt MM / DD / YYYY 08 / 08 / 2008
Mailing Address 637 Westridge Drive		<b>Transaction ID:</b> A2008-1605736
City Aurora	State IL	Zip Code 60504
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

**B.**

Full Name (Last, First, Middle Initial) Alan Dileo		Date of Receipt MM / DD / YYYY 08 / 22 / 2008
Mailing Address 637 Westridge Drive		<b>Transaction ID:</b> A2008-1752618
City Aurora	State IL	Zip Code 60504
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**C.**

Full Name (Last, First, Middle Initial) Paul Eisenstat		Date of Receipt MM / DD / YYYY 08 / 08 / 2008
Mailing Address 3104 Cherry Hills Drive		<b>Transaction ID:</b> A2008-1605769
City Champaign	State IL	Zip Code 61822
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.47
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 577.05	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	88.47
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 35

(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)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)  
Paul Eisenstat

Mailing Address 3104 Cherry Hills Drive

City State Zip Code  
Champaign IL 61822

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 615.52

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 2 / 2 0 0 8

Transaction ID: A2008-1752651

Amount of Each Receipt this Period

38.47

**B.**

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

Mailing Address 5002 Cedar Croft Drive

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 870.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 8 / 2 0 0 8

Transaction ID: A2008-1605770

Amount of Each Receipt this Period

58.00

**C.**

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

Mailing Address 5002 Cedar Croft Drive

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 928.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 2 / 2 0 0 8

Transaction ID: A2008-1752652

Amount of Each Receipt this Period

58.00

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

154.47

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

**A.** Full Name (Last, First, Middle Initial)  
Stephen Flannery  
 Mailing Address 19125 Autumn Woods Ave.  
 City Tampa State FL Zip Code 33647  
 Date of Receipt  /  /   
**Transaction ID:** A2008-1605761  
 Amount of Each Receipt this Period   
 FEC ID number of contributing federal political committee.   
 Name of Employer Coventry Health Care Inc. Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

**B.** Full Name (Last, First, Middle Initial)  
Stephen Flannery  
 Mailing Address 19125 Autumn Woods Ave.  
 City Tampa State FL Zip Code 33647  
 Date of Receipt  /  /   
**Transaction ID:** A2008-1752643  
 Amount of Each Receipt this Period   
 FEC ID number of contributing federal political committee.   
 Name of Employer Coventry Health Care Inc. Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

**C.** Full Name (Last, First, Middle Initial)  
Jane Furtwangles  
 Mailing Address 47 W. Calle Martina  
 City Green Valley State AZ Zip Code 85614  
 Date of Receipt  /  /   
**Transaction ID:** A2008-1605723  
 Amount of Each Receipt this Period   
 FEC ID number of contributing federal political committee.   
 Name of Employer Coventry Health Care Inc. Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

**SUBTOTAL** of Receipts This Page (optional) .....   
**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 / 35

(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)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Jane Furtwangles

Mailing Address 47 W. Calle Martina

City State Zip Code  
Green Valley AZ 85614

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 224.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 2 / 2 0 0 8

Transaction ID: A2008-1752605

Amount of Each Receipt this Period  
14.04

**B.**

Full Name (Last, First, Middle Initial)

Greg Hale

Mailing Address 1615 William Penn Drive #21E

City State Zip Code  
Naperville IL 60563

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

Name of Employer Coventry Health Care Inc. Occupation Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 8 / 2 0 0 8

Transaction ID: A2008-1605720

Amount of Each Receipt this Period  
14.04

**C.**

Full Name (Last, First, Middle Initial)

Greg Hale

Mailing Address 1615 William Penn Drive #21E

City State Zip Code  
Naperville IL 60563

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

Name of Employer Coventry Health Care Inc. Occupation Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 224.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 2 / 2 0 0 8

Transaction ID: A2008-1752602

Amount of Each Receipt this Period  
14.04

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

42.12

**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 16 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

**A.** Full Name (Last, First, Middle Initial)  
Janet Hamner  
Mailing Address 10219 Pemcrest  
City San Antonio State TX Zip Code 78240  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Coventry Health Care Inc. Occupation Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 585.00  
Date of Receipt 08 / 08 / 2008  
Transaction ID: A2008-1605771  
Amount of Each Receipt this Period 39.00

**B.** Full Name (Last, First, Middle Initial)  
Janet Hamner  
Mailing Address 10219 Pemcrest  
City San Antonio State TX Zip Code 78240  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Coventry Health Care Inc. Occupation Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 624.00  
Date of Receipt 08 / 22 / 2008  
Transaction ID: A2008-1752653  
Amount of Each Receipt this Period 39.00

**C.** Full Name (Last, First, Middle Initial)  
Kim Isbell  
Mailing Address 6140 Moss Rose Lane  
City Aubrey State TX Zip Code 76227  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Coventry Health Care Inc. Occupation Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 08 / 08 / 2008  
Transaction ID: A2008-1605729  
Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 98.00  
**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 17 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)  
Coventry Health Care Inc - First Health Group PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Kim Isbell	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 6140 Moss Rose Lane	<b>Transaction ID:</b> A2008-1752611
	City State Zip Code Aubrey TX 76227	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Coventry Health Care Inc. Occupation: Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 320.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Vishu Jhaveri	Date of Receipt MM / DD / YYYY 08 / 08 / 2008
	Mailing Address 1501 Applecroft Lane	<b>Transaction ID:</b> A2008-1605772
	City State Zip Code Cockeysville MD 21030	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Coventry Health Care Inc. Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 900.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Vishu Jhaveri	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 1501 Applecroft Lane	<b>Transaction ID:</b> A2008-1752654
	City State Zip Code Cockeysville MD 21030	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Coventry Health Care Inc. Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 960.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	140.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 35

(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)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)  
Bonnie Kitson

Mailing Address 4203 Shamans Drive

City State Zip Code  
Marietta GA 30062

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 8 / 2 0 0 8

Transaction ID: A2008-1605762

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Bonnie Kitson

Mailing Address 4203 Shamans Drive

City State Zip Code  
Marietta GA 30062

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 2 / 2 0 0 8

Transaction ID: A2008-1752644

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Kenneth Kurzendoerfer

Mailing Address 5104 Remington Road

City State Zip Code  
San Diego CA 92115

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

Name of Employer Coventry Health Care Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1125.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 8 / 2 0 0 8

Transaction ID: A2008-1605743

Amount of Each Receipt this Period

75.00

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

115.00

**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 19 / 35		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<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)  
Coventry Health Care Inc - First Health Group PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Kenneth Kurzendoerfer	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 5104 Remington Road	<b>Transaction ID:</b> A2008-1752625
	City San Diego State CA Zip Code 92115	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Coventry Health Care Inc. Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joan Liberatore	Date of Receipt MM / DD / YYYY 08 / 08 / 2008
	Mailing Address 1549 Virginia Avenue	<b>Transaction ID:</b> A2008-1605733
	City Monaca State PA Zip Code 15061	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Coventry Health Care Inc. Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joan Liberatore	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 1549 Virginia Avenue	<b>Transaction ID:</b> A2008-1752615
	City Monaca State PA Zip Code 15061	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Coventry Health Care Inc. Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>125.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 35  
(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)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kathleen Mallatt

Mailing Address 4304 South 16th Avenue

City State Zip Code  
Omaha NE 68135

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1153.95

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 8 / 2 0 0 8

**Transaction ID:** A2008-1605763

Amount of Each Receipt this Period  
76.93

**B.**

Full Name (Last, First, Middle Initial)  
Kathleen Mallatt

Mailing Address 4304 South 16th Avenue

City State Zip Code  
Omaha NE 68135

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.88

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 2 / 2 0 0 8

**Transaction ID:** A2008-1752645

Amount of Each Receipt this Period  
76.93

**C.**

Full Name (Last, First, Middle Initial)  
Kris Mazurowski

Mailing Address 1517 Lark Lane

City State Zip Code  
Naperville IL 60565

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

Name of Employer Coventry Health Care Inc. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 8 / 2 0 0 8

**Transaction ID:** A2008-1605737

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **173.86**

**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: (check only one)	PAGE 21 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)  
Coventry Health Care Inc - First Health Group PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Kris Mazurowski		Date of Receipt MM / DD / YYYY 08 / 22 / 2008		
	Mailing Address 1517 Lark Lane		Transaction ID: A2008-1752619		
	City Naperville	State IL	Zip Code 60565	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Coventry Health Care Inc.	Occupation EXECUTIVE	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼  
320.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Louise Osborne		Date of Receipt MM / DD / YYYY 08 / 08 / 2008		
	Mailing Address 234 Overbrook Road		Transaction ID: A2008-1605764		
	City Valencia	State PA	Zip Code 16059	Amount of Each Receipt this Period 58.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Coventry Health Care Inc.	Occupation Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼  
870.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Louise Osborne		Date of Receipt MM / DD / YYYY 08 / 22 / 2008		
	Mailing Address 234 Overbrook Road		Transaction ID: A2008-1752646		
	City Valencia	State PA	Zip Code 16059	Amount of Each Receipt this Period 58.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Coventry Health Care Inc.	Occupation Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼  
928.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	136.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

**A.** Full Name (Last, First, Middle Initial)  
Martin Owens

Mailing Address 43 Sussex Court

City Naperville State IL Zip Code 60540

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

Name of Employer Coventry Health Care Inc. Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 08 / 2008  
Transaction ID: A2008-1605722  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Martin Owens

Mailing Address 43 Sussex Court

City Naperville State IL Zip Code 60540

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

Name of Employer Coventry Health Care Inc. Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 22 / 2008  
Transaction ID: A2008-1752604  
Amount of Each Receipt this Period 20.00

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

Mailing Address 111 Patrick Avenue

City Willow Springs State IL Zip Code 60480

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 08 / 2008  
Transaction ID: A2008-1605755  
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 23 / 35  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sabrina Rajendran</p> <p>Mailing Address 111 Patrick Avenue</p> <p>City State Zip Code Willow Springs IL 60480</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Coventry Health Care Inc. Occupation: Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 22 / 2008</span></p> <p><b>Transaction ID:</b> A2008-1752637</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
---	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Hassan Rifaat</p> <p>Mailing Address 6820 Lullwater Road</p> <p>City State Zip Code Cumming GA 30040</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Coventry Health Care Inc. Occupation: Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">577.05</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 08 / 2008</span></p> <p><b>Transaction ID:</b> A2008-1605765</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">38.47</span></p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Hassan Rifaat</p> <p>Mailing Address 6820 Lullwater Road</p> <p>City State Zip Code Cumming GA 30040</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Coventry Health Care Inc. Occupation: Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">615.52</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 22 / 2008</span></p> <p><b>Transaction ID:</b> A2008-1752647</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">38.47</span></p>
---	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">101.94</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 24 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

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

Mailing Address 12915 Grant Street  
Suite 450

City Overland Park State KS Zip Code 66213

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: MM / DD / YYYY  
08 / 08 / 2008

Transaction ID: A2008-1605749

Amount of Each Receipt this Period 30.00

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

Mailing Address 12915 Grant Street  
Suite 450

City Overland Park State KS Zip Code 66213

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: MM / DD / YYYY  
08 / 22 / 2008

Transaction ID: A2008-1752631

Amount of Each Receipt this Period 30.00

**C.** Full Name (Last, First, Middle Initial)  
Dennis Roth

Mailing Address 5393 Bothe Avenue

City San Diego State CA Zip Code 92122

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

Name of Employer Coventry Health Care Inc. Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: MM / DD / YYYY  
08 / 08 / 2008

Transaction ID: A2008-1605728

Amount of Each Receipt this Period 40.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 35  
(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)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial) Dennis Roth		Date of Receipt MM / DD / YYYY 08 / 22 / 2008
Mailing Address 5393 Bothe Avenue		<b>Transaction ID:</b> A2008-1752610
City San Diego	State CA	Zip Code 92122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Coventry Health Care Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00	

**B.**

Full Name (Last, First, Middle Initial) Rebecca Sanborn		Date of Receipt MM / DD / YYYY 08 / 08 / 2008
Mailing Address 40 Calverton Road Suite 450		<b>Transaction ID:</b> A2008-1605753
City St. Louis	State MO	Zip Code 63135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

**C.**

Full Name (Last, First, Middle Initial) Rebecca Sanborn		Date of Receipt MM / DD / YYYY 08 / 22 / 2008
Mailing Address 40 Calverton Road Suite 450		<b>Transaction ID:</b> A2008-1752635
City St. Louis	State MO	Zip Code 63135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Coventry Health Care Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 35  
(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)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Melissa Schooley

Mailing Address 2920 Second St. North  
Suite 450

City State Zip Code  
Arlington VA 22201

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2008

**Transaction ID:** A2008-1605741

Amount of Each Receipt this Period  
40.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Melissa Schooley

Mailing Address 2920 Second St. North  
Suite 450

City State Zip Code  
Arlington VA 22201

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2008

**Transaction ID:** A2008-1752623

Amount of Each Receipt this Period  
40.00

**C.**

Full Name (Last, First, Middle Initial)  
Allen Spath

Mailing Address 13250 Windsong Lane  
Suite 450

City State Zip Code  
Clarksburg MD 20871

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2008

**Transaction ID:** A2008-1605750

Amount of Each Receipt this Period  
50.00

**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 27 / 35  
(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)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial) Allen Spath		Date of Receipt MM / DD / YYYY 08 / 22 / 2008	
Mailing Address 13250 Windsong Lane Suite 450		<b>Transaction ID:</b> A2008-1752632	
City Clarksburg	State MD	Zip Code 20871	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Coventry Health Care Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

**B.**

Full Name (Last, First, Middle Initial) Ann Stoepelwerth		Date of Receipt MM / DD / YYYY 08 / 08 / 2008	
Mailing Address 4360 S. Victor Avenue		<b>Transaction ID:</b> A2008-1605768	
City Tulsa	State OK	Zip Code 74105	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			
Name of Employer Coventry Health Care Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00		

**C.**

Full Name (Last, First, Middle Initial) Ann Stoepelwerth		Date of Receipt MM / DD / YYYY 08 / 22 / 2008	
Mailing Address 4360 S. Victor Avenue		<b>Transaction ID:</b> A2008-1752650	
City Tulsa	State OK	Zip Code 74105	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			
Name of Employer Coventry Health Care Inc.	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 608.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	126.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 35  
(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)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ernest Wells, jr

Mailing Address 2107 N. Magnolia Ave.

City State Zip Code  
Chicago IL 60614

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 865.50

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2008

**Transaction ID:** A2008-1605725

Amount of Each Receipt this Period  
57.80

**B.**

Full Name (Last, First, Middle Initial)  
Ernest Wells, jr

Mailing Address 2107 N. Magnolia Ave.

City State Zip Code  
Chicago IL 60614

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 923.20

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2008

**Transaction ID:** A2008-1752607

Amount of Each Receipt this Period  
57.70

**C.**

Full Name (Last, First, Middle Initial)  
Dorothy Williamson

Mailing Address 4404 Wilson Avenue

City State Zip Code  
Downers Grove IL 60515

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2008

**Transaction ID:** A2008-1605758

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **215.40**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 35  
(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)  
Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)  
Dorothy Williamson

Mailing Address 4404 Wilson Avenue

City Downers Grove State IL Zip Code 60515

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

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 08 / 22 / 2008

**Transaction ID:** A2008-1752640

Amount of Each Receipt this Period 100.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael Wilson

Mailing Address 2836 Macone Way

City Sacramento State CA Zip Code 95835

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

Name of Employer Coventry Health Care Inc. Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 08 / 2008

**Transaction ID:** A2008-1605727

Amount of Each Receipt this Period 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Wilson

Mailing Address 2836 Macone Way

City Sacramento State CA Zip Code 95835

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

Name of Employer Coventry Health Care Inc. Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 22 / 2008

**Transaction ID:** A2008-1752609

Amount of Each Receipt this Period 25.00

**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 30 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

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

Mailing Address 14022 Jump Drive

City State Zip Code  
Germantown MD 20874

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1275.00

Date of Receipt 08 / 08 / 2008  
**Transaction ID:** A2008-1605766

Amount of Each Receipt this Period 25.00

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

Mailing Address 14022 Jump Drive

City State Zip Code  
Germantown MD 20874

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 08 / 22 / 2008  
**Transaction ID:** A2008-1752648

Amount of Each Receipt this Period 25.00

**C.** Full Name (Last, First, Middle Initial)  
Dale Wolf

Mailing Address 9012 Congressional Court

City State Zip Code  
Potomac MD 20854

FEC ID number of contributing federal political committee. C

Name of Employer Coventry Health Care Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 08 / 2008  
**Transaction ID:** A2008-1605757

Amount of Each Receipt this Period 100.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 35  
(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)  
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial) Dale Wolf		Date of Receipt	
Mailing Address 9012 Congressional Court		M M / D D / Y Y Y Y 08 / 22 / 2008	
City	State	Zip Code	Transaction ID: A2008-1752639
Potomac	MD	20854	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		100.00	
Name of Employer Coventry Health Care Inc.		Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3059.16

**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 32 / 35

<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)  
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial)  
Judy Baker for Congress

Mailing Address 3075 South Rangeline Road

City State Zip Code  
Columbia MO 65201

Purpose of Disbursement  
Contribution

Candidate Name  
Judy Baker

Office Sought:  House  
 Senate  
 President  
State: MO District: 09

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: B233641  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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

NAME OF COMMITTEE (In Full)  
Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial)  
Caruth for Senate Cmte.

Mailing Address P.O. Box 280

City Athens State WV Zip Code 24712

Purpose of Disbursement  
G-2008 State Senate 10 WV

Candidate Name  
Donald T Caruth

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: B233647

Date of Disbursement

08 / 20 / 2008

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)  
Cmte to Re-elect Kevin Craig

Mailing Address #3 Heather Court

City Huntington State WV Zip Code 25705

Purpose of Disbursement  
G-2008 State House 15 WV

Candidate Name  
Kevin Craig

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: B233644

Date of Disbursement

08 / 20 / 2008

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)  
Steven Kominar Committee

Mailing Address 52 Wingfoot Drive

City Hurricane State WV Zip Code 25526

Purpose of Disbursement  
G-2008 State House 020 WV

Candidate Name  
K. Steven Kominar

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: B233642

Date of Disbursement

08 / 20 / 2008

Amount of Each Disbursement this Period

250.00

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

1000.00

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



Image# 28932929324

Form/Schedule: SA11AI

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

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