



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Cigna Corporation Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="1432.53"/>	<input type="text" value="1432.53"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="24496.89"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="110686.96"/>	<input type="text" value="323651.32"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="135183.85"/>	<input type="text" value="325083.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5000.00"/>	<input type="text" value="194900.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="130183.85"/>	<input type="text" value="130183.85"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Signa Corporation Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

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).....	16053.62	118959.94
(ii) Unitemized .....	6733.86	110791.90
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22787.48	229751.84
(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) .....	22787.48	229751.84
12. Transfers From Affiliated/Other Party Committees.....	87899.48	87899.48
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	6000.00
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 Transfers (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))..... ▶	110686.96	323651.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	110686.96	323651.32

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	1600.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	1600.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	146500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	5000.00	46800.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	5000.00	194900.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	194900.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	22787.48	229751.84
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22787.48	229751.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	1600.00
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	1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<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**

Full Name (Last, First, Middle Initial) <b>A. Anthony Abate</b>		Date of Receipt										
Mailing Address 900 Cottage Grove Rd		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td>/</td> <td>06</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	12	/	06	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y								
12	/	06	/	2012								
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121207-19824-14-49</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation Cigna Corp. VP Supply Chain Management		<table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00									
25.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>650.00</td> </tr> </table>	650.00										
650.00												

Full Name (Last, First, Middle Initial) <b>B. Anthony Abate</b>		Date of Receipt										
Mailing Address 900 Cottage Grove Rd		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td>/</td> <td>20</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	12	/	20	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y								
12	/	20	/	2012								
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121218-19712-14-47</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation Cigna Corp. VP Supply Chain Management		<table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00									
25.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>650.00</td> </tr> </table>	650.00										
650.00												

Full Name (Last, First, Middle Initial) <b>C. Michael B. Alexander</b>		Date of Receipt										
Mailing Address 128 E 15th St		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td>/</td> <td>06</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	12	/	06	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y								
12	/	06	/	2012								
City State Zip Code Ship Bottom NJ 08008-4467		<b>Transaction ID : 20121207-12021-14-49</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation Cigna Corp. Medical Director		<table border="1"> <tr> <td>26.93</td> </tr> </table>	26.93									
26.93												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>700.18</td> </tr> </table>	700.18										
700.18												

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>76.93</td> </tr> </table>	76.93
76.93		
<b>TOTAL</b> 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 7 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

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

Mailing Address 128 E 15th St

City Ship Bottom State NJ Zip Code 08008-4467

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

Name of Employer Cigna Corp. Occupation Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.18**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-11956-14-47**

Amount of Each Receipt this Period  
**26.93**

Full Name (Last, First, Middle Initial)  
**B. Jeffrey A. Amell**

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Segment Marketing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-20402-14-47**

Amount of Each Receipt this Period  
**8.00**

Full Name (Last, First, Middle Initial)  
**C. Doretta H. Andonucci**

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Marketing Comm Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-7971-14-47**

Amount of Each Receipt this Period  
**8.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>42.93</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 175
	<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. Ann H. Asbaty**  
Full Name (Last, First, Middle Initial)

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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 ▼ 900.25

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-337-14-49**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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 ▼ 900.25

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-334-14-47**

Amount of Each Receipt this Period  
50.00

**C. Jacquelyn A. Aube**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation VP Product Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-1810-14-49**

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: (check only one)	PAGE 9 OF 175
	<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. Jacquelyn A. Aube**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 Cottage Grove Rd  
City Hartford State CT Zip Code 06152-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation VP Product Development  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 20 / 2012  
**Transaction ID : 20121218-1798-14-47**  
Amount of Each Receipt this Period 50.00

**B. James Austin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 394 W Remington Dr  
City Chandler State AZ Zip Code 85286-7642  
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 ▼ 1213.93

Date of Receipt 12 / 06 / 2012  
**Transaction ID : 20121207-5405-14-49**  
Amount of Each Receipt this Period 46.74

**C. James Austin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 394 W Remington Dr  
City Chandler State AZ Zip Code 85286-7642  
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 ▼ 1213.93

Date of Receipt 12 / 20 / 2012  
**Transaction ID : 20121218-5376-14-47**  
Amount of Each Receipt this Period 46.74

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 143.48  
**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: (check only one)	PAGE 10 OF 175
	<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. Sanjiv Awasthi**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Corporate Services Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-23358-14-49**

Amount of Each Receipt this Period  
**15.00**

**B. Sanjiv Awasthi**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Corporate Services Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-23194-14-47**

Amount of Each Receipt this Period  
**15.00**

**C. Mark Bailey**  
Full Name (Last, First, Middle Initial)

Mailing Address 1640 Dallas Pkwy

City Plano State TX Zip Code 75093-4515

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

Name of Employer Cigna Corporation Occupation Sales Director-Direct Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-11886-14-49**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **80.00**

**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 11 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Mark Bailey</b>			Date of Receipt
Mailing Address 1640 Dallas Pkwy			<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20121218-11822-14-47</b>
Plano	TX	75093-4515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="50.00"/>
Name of Employer Cigna Corporation		Occupation Sales Director-Direct Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="350.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Thomas C. Banet</b>			Date of Receipt
Mailing Address Va 8484 Westpark Drive, Suite 950			<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20121207-4151-14-49</b>
McLean	VA	22102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="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 ▼	
		<input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Thomas C. Banet</b>			Date of Receipt
Mailing Address Va 8484 Westpark Drive, Suite 950			<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20121218-4126-14-47</b>
McLean	VA	22102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="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 ▼	
		<input type="text" value="260.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 175
	<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. John M. Belsen**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Treasury Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-1708-14-49**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Treasury Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-1696-14-47**

Amount of Each Receipt this Period  
10.00

**C. Jeff Berardo**  
Full Name (Last, First, Middle Initial)

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Director-Direct Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-2222-14-49**

Amount of Each Receipt this Period  
50.00

**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 13 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. Jeff Berardo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Director-Direct Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-2206-14-47**  
 Amount of Each Receipt this Period  
 50.00

**B. Jodi M. Berry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Two Securities Centre  
 City Atlanta State GA Zip Code 30305  
 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 ▼ 244.01

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-6860-14-49**  
 Amount of Each Receipt this Period  
 6.11

**C. Jodi M. Berry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Two Securities Centre  
 City Atlanta State GA Zip Code 30305  
 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 ▼ 244.01

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-6822-14-47**  
 Amount of Each Receipt this Period  
 7.42

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	63.53
<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 14 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Kim Bimestefer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3900 E Mexico Ave  
 Ste 1100  
 City Denver State CO Zip Code 80210-3946  
 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 **975.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-8552-14-49**  
 Amount of Each Receipt this Period  
**90.00**

**B. Kim Bimestefer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3900 E Mexico Ave  
 Ste 1100  
 City Denver State CO Zip Code 80210-3946  
 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 **975.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-8505-14-47**  
 Amount of Each Receipt this Period  
**90.00**

**C. Patricia A. Blaney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11016 Rushmore Dr  
 City Charlotte State NC Zip Code 28277-3474  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Client Account Support Sr Spec  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-3543-14-49**  
 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 15 OF 175  
(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**

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

Mailing Address 11016 Rushmore Dr

City State Zip Code  
 Charlotte NC 28277-3474

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Client Account Support Sr Spec

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 12 / 20 / 2012  
**Transaction ID : 20121218-3523-14-47**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. John J. Bogan**

Mailing Address 1601 Chestnut St # 2

City State Zip Code  
 Philadelphia PA 19192-0002

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

Name of Employer Occupation  
 Cigna Corp. Assoc Chief Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 12 / 06 / 2012  
**Transaction ID : 20121207-25968-14-49**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**c. John J. Bogan**

Mailing Address 1601 Chestnut St # 2

City State Zip Code  
 Philadelphia PA 19192-0002

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

Name of Employer Occupation  
 Cigna Corp. Assoc Chief Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 12 / 20 / 2012  
**Transaction ID : 20121218-25785-14-47**

Amount of Each Receipt this Period  
 50.00

**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: (check only one)	PAGE 16 OF 175
	<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. Diane M. Botticello**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ 500.50

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-1893-14-49**

Amount of Each Receipt this Period  
19.25

**B. Diane M. Botticello**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ 500.50

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-1880-14-47**

Amount of Each Receipt this Period  
19.25

**C. Susan J. Bousquet**  
Full Name (Last, First, Middle Initial)

Mailing Address 600 Lenox Ave

City Daytona Beach State FL Zip Code 32118-4731

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-2042-14-49**

Amount of Each Receipt this Period  
9.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 47.50

**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: (check only one)	PAGE 17 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

**A. Susan J. Bousquet**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 Lenox Ave  
 City State Zip Code  
 Daytona Beach FL 32118-4731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Senior Counsel  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 234.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-2028-14-47**  
 Amount of Each Receipt this Period  
 9.00

**B. Mark L. Boxer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO EVP CIO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2880.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-9818-14-49**  
 Amount of Each Receipt this Period  
 192.00

**C. Mark L. Boxer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO EVP CIO  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2880.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-9767-14-47**  
 Amount of Each Receipt this Period  
 192.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	393.00
<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: (check only one)	PAGE 18 OF 175
	<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. Brett C. Browchuk**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation SVP Service Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **3168.00**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-13654-14-49**

Amount of Each Receipt this Period **192.00**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation SVP Service Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **3168.00**

Date of Receipt **12 / 20 / 2012**  
**Transaction ID : 20121218-13585-14-47**

Amount of Each Receipt this Period **192.00**

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

Mailing Address 7555 Goodwin Rd

City Chattanooga State TN Zip Code 37421-3183

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 ▼ **300.00**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-8639-14-49**

Amount of Each Receipt this Period **25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **409.00**

**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 OF 175
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. William Brown**

Mailing Address 7555 Goodwin Rd

City Chattanooga State TN Zip Code 37421-3183

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 ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-8592-14-47**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**B. Kelly K. Brundin**

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Financial Analysis Sr Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **344.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**

**Transaction ID : 20121207-3192-14-49**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**C. Kelly K. Brundin**

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Financial Analysis Sr Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **344.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-3173-14-47**

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 20 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey A. Brunetti</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-2129-14-47</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 7.70
City Philadelphia	State PA	Zip Code 19192-0002
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Tax Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.20	

Full Name (Last, First, Middle Initial) <b>B. Cheryll B. Bruning</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-4280-14-47</b>
Mailing Address 7555 Goodwin Rd		Amount of Each Receipt this Period 8.00
City Chattanooga	State TN	Zip Code 37421-3183
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Architecture Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

Full Name (Last, First, Middle Initial) <b>C. Zigmund R. Brzezinski</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-2716-14-49</b>
Mailing Address 499 Washington Blvd		Amount of Each Receipt this Period 17.11
City Jersey City	State NJ	Zip Code 07310-1995
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.19	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32.81
<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 21 OF 175
	<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. Zigmund R. Brzezinski**  
Full Name (Last, First, Middle Initial)

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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 ▼ **501.19**

Date of Receipt **12 / 20 / 2012**  
**Transaction ID : 20121218-2699-14-47**

Amount of Each Receipt this Period **17.11**

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

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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 ▼ **372.24**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-4546-14-49**

Amount of Each Receipt this Period **14.94**

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

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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 ▼ **372.24**

Date of Receipt **12 / 20 / 2012**  
**Transaction ID : 20121218-4518-14-47**

Amount of Each Receipt this Period **41.41**

**SUBTOTAL** of Receipts This Page (optional)..... **73.46**

**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 22 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

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

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Internation Occupation VP Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
964.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-13407-14-49**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Internation Occupation VP Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
964.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-13338-14-47**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Mark Butler**

Mailing Address 2223 Washington St

City Newton State MA Zip Code 02462-1417

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 ▼  
650.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-9415-14-49**

Amount of Each Receipt this Period  
25.00

**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: (check only one)	PAGE 23 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. Mark Butler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2223 Washington St  
 City Newton State MA Zip Code 02462-1417  
 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 ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-9364-14-47**  
 Amount of Each Receipt this Period  
 25.00

**B. Stephanie Byrne**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Actuarial Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-94-14-47**  
 Amount of Each Receipt this Period  
 8.00

**C. Dennis F. Cain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City Philadelphia State PA Zip Code 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Compliance Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.97

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-2452-14-49**  
 Amount of Each Receipt this Period  
 9.10

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 42.10  
**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 24 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Dennis F. Cain**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.97

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-2435-14-47**

Amount of Each Receipt this Period  
9.10

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

Mailing Address 1640 Dallas Pkwy

City Plano State TX Zip Code 75093-4515

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-5643-14-49**

Amount of Each Receipt this Period  
15.00

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

Mailing Address 1640 Dallas Pkwy

City Plano State TX Zip Code 75093-4515

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-5614-14-47**

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 39.10

**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: (check only one)	PAGE 25 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. James R. Carey**

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer: CT GENERAL LIFE INSURANCE CO  
Occupation: Account Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-812-14-47**

Amount of Each Receipt this Period  
**8.00**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer: CT GENERAL LIFE INSURANCE CO  
Occupation: Real Estate Sr Managing Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**

**Transaction ID : 20121207-733-14-49**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer: CT GENERAL LIFE INSURANCE CO  
Occupation: Real Estate Sr Managing Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-727-14-47**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **58.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 175
	<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. Charles R. Catalano**  
Full Name (Last, First, Middle Initial)

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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 ▼ **560.00**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-1782-14-49**

Amount of Each Receipt this Period **25.00**

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

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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 ▼ **560.00**

Date of Receipt **12 / 20 / 2012**  
**Transaction ID : 20121218-1770-14-47**

Amount of Each Receipt this Period **25.00**

**C. Michelle L. Cavner**  
Full Name (Last, First, Middle Initial)

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix State AZ Zip Code 85085-8200

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-5983-14-49**

Amount of Each Receipt this Period **50.00**

**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 27 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Michelle L. Cavner**

Mailing Address 25500 N Norterra Dr  
Bldg B

City Phoenix State AZ Zip Code 85085-8200

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-5951-14-47**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. W. Cetti**

Mailing Address 8505 E Orchard Rd

City Greenwood Village State CO Zip Code 80111-5002

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Provider Contracting Sr Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
234.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-6884-14-49**

Amount of Each Receipt this Period  
9.00

Full Name (Last, First, Middle Initial)  
**C. W. Cetti**

Mailing Address 8505 E Orchard Rd

City Greenwood Village State CO Zip Code 80111-5002

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Provider Contracting Sr Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
234.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-6846-14-47**

Amount of Each Receipt this Period  
9.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 68.00

**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 28 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

**A. Leslie A. Charles**  
Full Name (Last, First, Middle Initial)

Mailing Address Two Securities Centre

City Atlanta State GA Zip Code 30305

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

Name of Employer Cigna Corp. Occupation Financial Analysis Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-17015-14-49**

Amount of Each Receipt this Period  
**12.00**

**B. Leslie A. Charles**  
Full Name (Last, First, Middle Initial)

Mailing Address Two Securities Centre

City Atlanta State GA Zip Code 30305

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

Name of Employer Cigna Corp. Occupation Financial Analysis Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-16928-14-47**

Amount of Each Receipt this Period  
**12.00**

**C. Karen Choti-McConnel**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Treasury Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **212.42**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-7555-14-49**

Amount of Each Receipt this Period  
**8.17**

**SUBTOTAL** of Receipts This Page (optional)..... **32.17**

**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 OF 175
	<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. Karen Choti-McConnel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation Treasury Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.42

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-7510-14-47**  
 Amount of Each Receipt this Period  
 8.17

**B. Kenneth W. Claar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1777 Sentry Pkwy W  
 City Blue Bell State PA Zip Code 19422-2207  
 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 ▼ 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-2669-14-47**  
 Amount of Each Receipt this Period  
 8.00

**C. Robert F. Clark**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation VP Coli  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-395-14-49**  
 Amount of Each Receipt this Period  
 90.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 106.17  
**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 OF 175  
(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**

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. VP Coli

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-392-14-47**

Amount of Each Receipt this Period  
 90.00

Full Name (Last, First, Middle Initial)  
**B. Loretta M. Clifford**

Mailing Address 1600 W Carson St

City State Zip Code  
 Pittsburgh PA 15219-1031

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 200.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-2445-14-47**

Amount of Each Receipt this Period  
 7.70

Full Name (Last, First, Middle Initial)  
**C. Gina L. Collins**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012

**Transaction ID : 20121207-11303-14-49**

Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **117.70**

**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 OF 175  
(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. Gina L. Collins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 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 ▼ **380.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**  
**Transaction ID : 20121218-11242-14-47**  
 Amount of Each Receipt this Period  
**20.00**

**B. Michael Conrad**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 N Brand Blvd  
 City Glendale State CA Zip Code 91203-2311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager-National Accts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **2260.88**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**  
**Transaction ID : 20121207-2306-14-49**  
 Amount of Each Receipt this Period  
**9.67**

**C. Michael Conrad**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 N Brand Blvd  
 City Glendale State CA Zip Code 91203-2311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager-National Accts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **2260.88**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**  
**Transaction ID : 20121218-2290-14-47**  
 Amount of Each Receipt this Period  
**9.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **39.34**  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 175
	<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. Lorraine M. Consiglio**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Corporate Security Sr Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.80

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-7812-14-49**

Amount of Each Receipt this Period  
12.00

**B. Lorraine M. Consiglio**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Corporate Security Sr Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.80

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-7767-14-47**

Amount of Each Receipt this Period  
12.00

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation President and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4585.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-478-14-49**

Amount of Each Receipt this Period  
192.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 216.00

**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 33 OF 175
	<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. David M. Cordani**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation President and CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4585.00

Date of Receipt 12 / 20 / 2012  
**Transaction ID : 20121218-473-14-47**

Amount of Each Receipt this Period 192.00

**B. Henri R. Cournand**  
Full Name (Last, First, Middle Initial)

Mailing Address 5310 E High St

City Phoenix State AZ Zip Code 85054-5469

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Strat And Bus Develop Sr Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 06 / 2012  
**Transaction ID : 20121207-6857-14-49**

Amount of Each Receipt this Period 20.00

**C. Henri R. Cournand**  
Full Name (Last, First, Middle Initial)

Mailing Address 5310 E High St

City Phoenix State AZ Zip Code 85054-5469

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Strat And Bus Develop Sr Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 20 / 2012  
**Transaction ID : 20121218-6819-14-47**

Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 232.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 175
	<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. Michael Cousins**  
Full Name (Last, First, Middle Initial)  
Mailing Address 701 Corporate Center Dr  
City Raleigh State NC Zip Code 27607-5084  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cigna Corp. Occupation Clinical Program Sr Dir  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-18487-14-49**  
Amount of Each Receipt this Period **50.00**

**B. Michael Cousins**  
Full Name (Last, First, Middle Initial)  
Mailing Address 701 Corporate Center Dr  
City Raleigh State NC Zip Code 27607-5084  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cigna Corp. Occupation Clinical Program Sr Dir  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **12 / 20 / 2012**  
**Transaction ID : 20121218-18391-14-47**  
Amount of Each Receipt this Period **50.00**

**C. Wesley Cowen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2700 Post Oak Blvd  
City Houston State TX Zip Code 77056-5784  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cigna Corp. Occupation Manager Account Mgmt  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **234.00**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-24039-14-49**  
Amount of Each Receipt this Period **9.00**

**SUBTOTAL** of Receipts This Page (optional)..... **109.00**  
**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 35 OF 175
	<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. Wesley Cowen**  
Full Name (Last, First, Middle Initial)

Mailing Address 2700 Post Oak Blvd

City Houston State TX Zip Code 77056-5784

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

Name of Employer Cigna Corp. Occupation Manager Account Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-23873-14-47**

Amount of Each Receipt this Period  
 9.00

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

Mailing Address 216 B Ave

City Coronado State CA Zip Code 92118-1955

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

Name of Employer Cigna Corp. Occupation Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-13176-14-49**

Amount of Each Receipt this Period  
 19.25

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

Mailing Address 216 B Ave

City Coronado State CA Zip Code 92118-1955

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

Name of Employer Cigna Corp. Occupation Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-13107-14-47**

Amount of Each Receipt this Period  
 19.25

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 47.50

**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: (check only one)	PAGE 36 OF 175
	<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. Andrew D. Crooks**  
Full Name (Last, First, Middle Initial)

Mailing Address 2701 N Rocky Point Dr

City Tampa State FL Zip Code 33607-5917

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 ▼ 1250.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-8426-14-49**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2701 N Rocky Point Dr

City Tampa State FL Zip Code 33607-5917

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 ▼ 1250.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-8380-14-47**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2 College Park Dr

City Hooksett State NH Zip Code 03106-1636

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 ▼ 520.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-10201-14-49**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 220.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

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

Mailing Address 2 College Park Dr

City State Zip Code  
Hooksett NH 03106-1636

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-10144-14-47**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 601 Pennsylvania Ave NW

City State Zip Code  
Washington DC 20004-2601

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

Name of Employer Occupation  
Cigna Corp. Government Affairs Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
620.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-2504-14-49**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 601 Pennsylvania Ave NW

City State Zip Code  
Washington DC 20004-2601

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

Name of Employer Occupation  
Cigna Corp. Government Affairs Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
620.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-2487-14-47**

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: (check only one)	PAGE 38 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Johannes M. De Jong</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-242-14-49</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 25.00
City Philadelphia	State PA	Zip Code 19192-0002
FEC ID number of contributing federal political committee.	C	
Name of Employer Cigna Corp.	Occupation VP Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>B. Johannes M. De Jong</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-239-14-47</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 25.00
City Philadelphia	State PA	Zip Code 19192-0002
FEC ID number of contributing federal political committee.	C	
Name of Employer Cigna Corp.	Occupation VP Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>C. Christopher De Rosa</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-1712-14-49</b>
Mailing Address 26 Executive Park		Amount of Each Receipt this Period 10.00
City Irvine	State CA	Zip Code 92614-6739
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 ▼ 260.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 175
	<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. Christopher De Rosa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26 Executive Park  
 City Irvine State CA Zip Code 92614-6739  
 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 **260.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-1700-14-47**  
 Amount of Each Receipt this Period  
**10.00**

**B. John R. DeFeo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 Deverell Dr  
 City North Barrington State IL Zip Code 60010-6924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation VP Information Technology  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-21066-14-49**  
 Amount of Each Receipt this Period  
**50.00**

**C. John R. DeFeo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 Deverell Dr  
 City North Barrington State IL Zip Code 60010-6924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation VP Information Technology  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-20941-14-47**  
 Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>110.00</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: (check only one)	PAGE 40 OF 175
	<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. Elizabeth DeForest**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 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 ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-9773-14-47**  
 Amount of Each Receipt this Period  
 15.00

**B. Maryann P. Depreaux**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Investment Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-1318-14-47**  
 Amount of Each Receipt this Period  
 7.70

**C. Edwin J. Detrick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City Philadelphia State PA Zip Code 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation VP Investor Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-2593-14-49**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	42.70
<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 41 OF 175  
(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**

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

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Investor Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-2576-14-47**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 5310 E High St

City Phoenix State AZ Zip Code 85054-5469

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 ▼ **522.87**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-29-14-49**

Amount of Each Receipt this Period  
**27.68**

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

Mailing Address 5310 E High St

City Phoenix State AZ Zip Code 85054-5469

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 ▼ **522.87**

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-28-14-47**

Amount of Each Receipt this Period  
**6.31**

**SUBTOTAL** of Receipts This Page (optional)..... **53.99**

**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 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Michele Dolphin</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-7227-14-47</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 7.70
City Philadelphia	State PA	Zip Code 19192-0002
FEC ID number of contributing federal political committee.	C	
Name of Employer Cigna Corp.	Occupation Financial Analysis Sr Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.20	

Full Name (Last, First, Middle Initial) <b>B. Edward L. Du Brow</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-1395-14-49</b>
Mailing Address 13041 N Del Webb Blvd		Amount of Each Receipt this Period 10.00
City Sun City	State AZ	Zip Code 85351-3034
FEC ID number of contributing federal political committee.	C	
Name of Employer Cigna HEALTHCARE OF AZ, INC	Occupation Internal Medicine	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Edward L. Du Brow</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-1387-14-47</b>
Mailing Address 13041 N Del Webb Blvd		Amount of Each Receipt this Period 10.00
City Sun City	State AZ	Zip Code 85351-3034
FEC ID number of contributing federal political committee.	C	
Name of Employer Cigna HEALTHCARE OF AZ, INC	Occupation Internal Medicine	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	27.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 175
	<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. Louise Duback**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3636 Nobel Dr  
 City San Diego State CA Zip Code 92122-1022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna HEALTHCARE OF CA, INC. Occupation Provider Contracting Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-3092-14-47**  
 Amount of Each Receipt this Period  
 7.70

**B. Leanne Engels**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 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 ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-1373-14-49**  
 Amount of Each Receipt this Period  
 10.00

**C. Leanne Engels**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 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 ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-1365-14-47**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 27.70  
**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 44 OF 175
	<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. Cheryl Ann Englert**  
Full Name (Last, First, Middle Initial)

Mailing Address 15615 Lemon Fish Dr

City State Zip Code  
Lakewood Ranch FL 34202-5847

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

Name of Employer Occupation  
INT'L REHAB. ASSOCIATES, INC. Business Project Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
207.48

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2012  
**Transaction ID : 20121218-3921-14-47**

Amount of Each Receipt this Period  
7.98

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

Mailing Address 8228 Academy Rd

City State Zip Code  
Ellicott City MD 21043-5519

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2012  
**Transaction ID : 20121207-110-14-49**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 8228 Academy Rd

City State Zip Code  
Ellicott City MD 21043-5519

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2012  
**Transaction ID : 20121218-108-14-47**

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	47.98
<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 45 OF 175
	<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. Jordan G. Farrell**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Financial Analysis Sr Spec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 06 / 2012  
**Transaction ID : 20121207-18630-14-49**

Amount of Each Receipt this Period 10.00

**B. Jordan G. Farrell**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Financial Analysis Sr Spec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 20 / 2012  
**Transaction ID : 20121218-18534-14-47**

Amount of Each Receipt this Period 10.00

**C. Kimberly A. Feltovic**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Account Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.50

Date of Receipt 12 / 06 / 2012  
**Transaction ID : 20121207-12128-14-49**

Amount of Each Receipt this Period 19.25

**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: (check only one)	PAGE 46 OF 175
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Kimberly A. Feltovic</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-12063-14-47</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 19.25
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Cigna Corp.	Occupation Account Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.50	

Full Name (Last, First, Middle Initial) <b>B. Staci F. Fernandez</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-1953-14-49</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 20.00
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Business Project Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. Staci F. Fernandez</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-1940-14-47</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 20.00
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Business Project Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	59.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 175
	<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. Scott M. Filiault**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt **12 / 06 / 2012**

**Transaction ID : 20121207-252-14-49**

Amount of Each Receipt this Period **25.00**

**B. Scott M. Filiault**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt **12 / 20 / 2012**

**Transaction ID : 20121218-249-14-47**

Amount of Each Receipt this Period **25.00**

**C. David H. Finley**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **12 / 06 / 2012**

**Transaction ID : 20121207-20839-14-49**

Amount of Each Receipt this Period **50.00**

**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 48 OF 175
	(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"/> 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. David H. Finley**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Medical Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**  
**Transaction ID : 20121218-20717-14-47**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 1012 Balsam Dr

City Washington State PA Zip Code 15301-9561

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

Name of Employer INT'L REHAB. ASSOCIATES, INC. Occupation Client Account Support Sr Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**  
**Transaction ID : 20121207-10282-14-49**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 1012 Balsam Dr

City Washington State PA Zip Code 15301-9561

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

Name of Employer INT'L REHAB. ASSOCIATES, INC. Occupation Client Account Support Sr Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**  
**Transaction ID : 20121218-10225-14-47**

Amount of Each Receipt this Period  
**10.00**

**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 49 OF 175
	<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. Margaret M. Fitzpatrick**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Chief Communic Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-20806-14-49**

Amount of Each Receipt this Period  
 100.00

**B. Margaret M. Fitzpatrick**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Chief Communic Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-20684-14-47**

Amount of Each Receipt this Period  
 100.00

**C. Susan P. Fitzpatrick**  
Full Name (Last, First, Middle Initial)

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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 ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-1709-14-49**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**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 50 OF 175
	<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. Susan P. Fitzpatrick**  
Full Name (Last, First, Middle Initial)

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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 ▼ 460.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-1697-14-47**

Amount of Each Receipt this Period  
50.00

**B. Laurel A. Flebotte**  
Full Name (Last, First, Middle Initial)

Mailing Address 1571 Sawgrass Corporate Pkwy

City Sunrise State FL Zip Code 33323-2862

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.20

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-344-14-47**

Amount of Each Receipt this Period  
7.70

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

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix State AZ Zip Code 85085-8200

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 ▼ 250.12

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-9055-14-49**

Amount of Each Receipt this Period  
9.62

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 67.32

**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 51 OF 175
	<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. Robert C. Flores**  
Full Name (Last, First, Middle Initial)

Mailing Address 25500 N Norterra Dr  
Bldg B

City Phoenix State AZ Zip Code 85085-8200

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 ▼ 250.12

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-9005-14-47**

Amount of Each Receipt this Period  
9.62

**B. Charles S. Foreman**  
Full Name (Last, First, Middle Initial)

Mailing Address 401 Chestnut St

City Chattanooga State TN Zip Code 37402-4924

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 ▼ 208.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-5272-14-47**

Amount of Each Receipt this Period  
8.00

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

Mailing Address 50 Southport Pl

City Southport State CT Zip Code 06890-1487

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager-National Accts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-473-14-49**

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 27.62

**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 52 OF 175  
(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**

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

Mailing Address 50 Southport Pl

City State Zip Code  
 Southport CT 06890-1487

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Sales Manager-National Accts

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 12 / 20 / 2012  
**Transaction ID : 20121218-468-14-47**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**B. Timothy E. Freeland**

Mailing Address 176 Lake Dr

City State Zip Code  
 Greenwood IN 46142-9182

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 12 / 06 / 2012  
**Transaction ID : 20121207-10473-14-49**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**C. Timothy E. Freeland**

Mailing Address 176 Lake Dr

City State Zip Code  
 Greenwood IN 46142-9182

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 12 / 20 / 2012  
**Transaction ID : 20121218-10416-14-47**

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 53 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

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

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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 ▼ **850.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-2917-14-49**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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 ▼ **850.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-2899-14-47**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. Susan E. Gaca**

Mailing Address 2220 Millbrook Dr

City Aurora State IL Zip Code 60502-6953

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 ▼ **407.66**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-6498-14-49**

Amount of Each Receipt this Period  
**25.00**

**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 54 OF 175
	(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"/> 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. Susan E. Gaca**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2220 Millbrook Dr  
 City Aurora State IL Zip Code 60502-6953  
 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 ▼ 407.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-6462-14-47**  
 Amount of Each Receipt this Period  
 25.00

**B. Thomas Garvey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 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 ▼ 500.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-2086-14-49**  
 Amount of Each Receipt this Period  
 19.25

**c. Thomas Garvey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 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 ▼ 500.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-2072-14-47**  
 Amount of Each Receipt this Period  
 19.25

**SUBTOTAL** of Receipts This Page (optional).....▶ 63.50  
**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 55 OF 175  
(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**

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

Mailing Address 25500 N Norterra Dr  
 Bldg B

City Phoenix State AZ Zip Code 85085-8200

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 ▼ **238.42**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**

**Transaction ID : 20121207-4247-14-49**

Amount of Each Receipt this Period  
**9.17**

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

Mailing Address 25500 N Norterra Dr  
 Bldg B

City Phoenix State AZ Zip Code 85085-8200

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 ▼ **238.42**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-4221-14-47**

Amount of Each Receipt this Period  
**9.17**

Full Name (Last, First, Middle Initial)  
**C. Kelley M. Getty**

Mailing Address 322 Crystal Circle

City Oviedo State FL Zip Code 32765

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Business Project Sr Spec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **208.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-148-14-47**

Amount of Each Receipt this Period  
**8.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **26.34**

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

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

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

FOR LINE NUMBER: PAGE 56 OF 175  
(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. David J. Giannoni**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 612 Wheelers Farms Rd  
 City Milford State CT Zip Code 06461-1673  
 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 ▼ 581.39

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-4078-14-49**  
 Amount of Each Receipt this Period  
 9.26

**B. David J. Giannoni**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 612 Wheelers Farms Rd  
 City Milford State CT Zip Code 06461-1673  
 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 ▼ 581.39

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-4053-14-47**  
 Amount of Each Receipt this Period  
 6.79

**C. Gerianne Goff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 N Brand Blvd  
 City Glendale State CA Zip Code 91203-2311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Client Account Support Sr Spec  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-4090-14-47**  
 Amount of Each Receipt this Period  
 8.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 24.05  
**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 57 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Ronald J. Goglia</b>		Date of Receipt
Mailing Address 300 Morrison Ave		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City Easton	State PA	Zip Code 18042-1439
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20121218-2286-14-47</b>
Name of Employer CT GENERAL LIFE INSURANCE CO		Amount of Each Receipt this Period
Occupation Operations Director		<input type="text" value="7.70"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="200.20"/>	

Full Name (Last, First, Middle Initial) <b>B. David M. Goloff</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20121207-2098-14-49</b>
Name of Employer CT GENERAL LIFE INSURANCE CO		Amount of Each Receipt this Period
Occupation Compliance Manager		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) <b>C. David M. Goloff</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20121218-2084-14-47</b>
Name of Employer CT GENERAL LIFE INSURANCE CO		Amount of Each Receipt this Period
Occupation Compliance Manager		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="260.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="27.70"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Paul J. Gontarek</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-3034-14-49</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 75.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1390.00
Name of Employer Cigna Corp.	Occupation Assoc Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Paul J. Gontarek</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-3016-14-47</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 75.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1390.00
Name of Employer Cigna Corp.	Occupation Assoc Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Donna W. Gore</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-227-14-49</b>
Mailing Address 49 Briarwood Dr		Amount of Each Receipt this Period 9.62
City Old Saybrook	State CT Zip Code 06475-2007	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 281.79
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Financial Analysis Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	159.62
<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 59 OF 175
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

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

Mailing Address 49 Briarwood Dr

City State Zip Code  
Old Saybrook CT 06475-2007

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
281.79

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2012

**Transaction ID : 20121218-224-14-47**

Amount of Each Receipt this Period  
9.62

Full Name (Last, First, Middle Initial)  
**B. Kristen Gorodetzer**

Mailing Address 1601 Chestnut St # 2

City State Zip Code  
Philadelphia PA 19192-0002

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 ▼  
260.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2012

**Transaction ID : 20121207-11811-14-49**

Amount of Each Receipt this Period  
10.00

Full Name (Last, First, Middle Initial)  
**C. Kristen Gorodetzer**

Mailing Address 1601 Chestnut St # 2

City State Zip Code  
Philadelphia PA 19192-0002

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 ▼  
260.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2012

**Transaction ID : 20121218-11747-14-47**

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 29.62

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Mark A. Gosselin</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121207-695-14-49</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer Occupation CT GENERAL LIFE INSURANCE CO App Development Director		10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		260.00

Full Name (Last, First, Middle Initial) <b>B. Mark A. Gosselin</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121218-689-14-47</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer Occupation CT GENERAL LIFE INSURANCE CO App Development Director		10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		260.00

Full Name (Last, First, Middle Initial) <b>C. Richard Gray</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121207-2008-14-49</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer Occupation Cigna Corp. Strat And Bus Develop Sr Dir		25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		650.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<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 61 OF 175  
(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. Richard Gray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. Strat And Bus Develop Sr Dir  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-1994-14-47**  
 Amount of Each Receipt this Period  
 25.00

**B. David D. Guilmette**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 E 45th St  
 City State Zip Code  
 New York NY 10017-3144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. President Global Employer Sgmt  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-19561-14-49**  
 Amount of Each Receipt this Period  
 192.00

**C. David D. Guilmette**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 E 45th St  
 City State Zip Code  
 New York NY 10017-3144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. President Global Employer Sgmt  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-19457-14-47**  
 Amount of Each Receipt this Period  
 192.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 409.00  
**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 62 OF 175
	<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. Joseph L. Hannah**  
Full Name (Last, First, Middle Initial)

Mailing Address 901 E Cary St

City Richmond	State VA	Zip Code 23219-4063
------------------	-------------	------------------------

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 ▼  
520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-5250-14-49**

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 901 E Cary St

City Richmond	State VA	Zip Code 23219-4063
------------------	-------------	------------------------

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 ▼  
520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-5221-14-47**

Amount of Each Receipt this Period  
 20.00

**C. Ben K. Haynes**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford	State CT	Zip Code 06152-0001
------------------	-------------	------------------------

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 ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-3781-14-49**

Amount of Each Receipt this Period  
 15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<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 63 OF 175
	(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"/> 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. Ben K. Haynes**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ **275.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**  
**Transaction ID : 20121218-3760-14-47**

Amount of Each Receipt this Period  
**15.00**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**  
**Transaction ID : 20121207-1767-14-49**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**  
**Transaction ID : 20121218-1755-14-47**

Amount of Each Receipt this Period  
**10.00**

**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 64 OF 175
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. Clay R. Hedlund**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1640 Dallas Pkwy  
City Plano State TX Zip Code 75093-4515  
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 **350.83**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-6368-14-49**  
Amount of Each Receipt this Period **13.55**

**B. Clay R. Hedlund**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1640 Dallas Pkwy  
City Plano State TX Zip Code 75093-4515  
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 **350.83**

Date of Receipt **12 / 20 / 2012**  
**Transaction ID : 20121218-6333-14-47**  
Amount of Each Receipt this Period **13.55**

**C. Niels A. Heemsker**  
Full Name (Last, First, Middle Initial)  
Mailing Address 525 W Monroe St  
City Chicago State IL Zip Code 60661-3629  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Sales Manager  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **260.00**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-11362-14-49**  
Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **37.10**  
**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: (check only one)	PAGE 65 OF 175
	<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. Niels A. Heemsker**  
Full Name (Last, First, Middle Initial)

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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 ▼  
260.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-11301-14-47**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Provider Contracting Sr Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-10989-14-47**

Amount of Each Receipt this Period  
8.00

**c. Charles Heugel**  
Full Name (Last, First, Middle Initial)

Mailing Address 2701 N Rocky Point Dr

City Tampa State FL Zip Code 33607-5917

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

Name of Employer Occupation  
Cigna Corp. Senior Account Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-15839-14-47**

Amount of Each Receipt this Period  
8.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 26.00

**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 66 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Anthony Hipp**

Mailing Address 1 Cigna Dr

City State Zip Code  
Bourbonnais IL 60914-4475

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

Name of Employer Occupation  
Cigna Corp. Operations Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2012  
**Transaction ID : 20121207-12783-14-49**

Amount of Each Receipt this Period  
19.25

Full Name (Last, First, Middle Initial)  
**B. Anthony Hipp**

Mailing Address 1 Cigna Dr

City State Zip Code  
Bourbonnais IL 60914-4475

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

Name of Employer Occupation  
Cigna Corp. Operations Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2012  
**Transaction ID : 20121218-12715-14-47**

Amount of Each Receipt this Period  
19.25

Full Name (Last, First, Middle Initial)  
**c. Christopher J. Hocevar**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Hartford CT 06152-0001

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Segment Lead

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2012  
**Transaction ID : 20121207-9491-14-49**

Amount of Each Receipt this Period  
115.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 153.50

**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: (check only one)	PAGE 67 OF 175
	<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. Christopher J. Hocevar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Segment Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-9440-14-47**  
 Amount of Each Receipt this Period  
 115.00

**B. Kathleen M. Hockmuth**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 135 Brackett Rd  
 City Rye State NH Zip Code 03870-2044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Compliance Sr Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-559-14-49**  
 Amount of Each Receipt this Period  
 10.00

**C. Kathleen M. Hockmuth**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 135 Brackett Rd  
 City Rye State NH Zip Code 03870-2044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Compliance Sr Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-554-14-47**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<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: (check only one)	PAGE 68 OF 175
	<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. Robert P. Hockmuth**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 College Park Dr

City Hooksett State NH Zip Code 03106-1636

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 ▼ **500.24**

Date of Receipt **12 / 06 / 2012**

**Transaction ID : 20121207-796-14-49**

Amount of Each Receipt this Period **19.24**

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

Mailing Address 2 College Park Dr

City Hooksett State NH Zip Code 03106-1636

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 ▼ **500.24**

Date of Receipt **12 / 20 / 2012**

**Transaction ID : 20121218-790-14-47**

Amount of Each Receipt this Period **19.24**

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

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer FIN Cigna Financial Reporting Occupation VP Chief Accounting Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 06 / 2012**

**Transaction ID : 20121207-14505-14-49**

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: (check only one)	PAGE 69 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Mary T. Hoeltzel</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-14429-14-47</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 10.00
City Philadelphia	State PA	Zip Code 19192-0002
FEC ID number of contributing federal political committee.	C	
Name of Employer FIN Cigna Financial Reporting	Occupation VP Chief Accounting Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Tamara Horwitz</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-17206-14-49</b>
Mailing Address 3430 List PI		Amount of Each Receipt this Period 25.00
City Minneapolis	State MN	Zip Code 55416-4559
FEC ID number of contributing federal political committee.	C	
Name of Employer Cigna Corp.	Occupation Marketing Product Sr Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

Full Name (Last, First, Middle Initial) <b>C. Tamara Horwitz</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-17119-14-47</b>
Mailing Address 3430 List PI		Amount of Each Receipt this Period 25.00
City Minneapolis	State MN	Zip Code 55416-4559
FEC ID number of contributing federal political committee.	C	
Name of Employer Cigna Corp.	Occupation Marketing Product Sr Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 175
	<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. Daven C. Hunigan**  
Full Name (Last, First, Middle Initial)

Mailing Address 7555 Goodwin Rd

City Chattanooga	State TN	Zip Code 37421-3183
---------------------	-------------	------------------------

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

Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Systems Analysis Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
244.66

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	06	/	2012

**Transaction ID : 20121207-3377-14-49**

Amount of Each Receipt this Period  
9.52

**B. Daven C. Hunigan**  
Full Name (Last, First, Middle Initial)

Mailing Address 7555 Goodwin Rd

City Chattanooga	State TN	Zip Code 37421-3183
---------------------	-------------	------------------------

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

Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Systems Analysis Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
244.66

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2012

**Transaction ID : 20121218-3358-14-47**

Amount of Each Receipt this Period  
9.52

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

Mailing Address 1601 Chestnut St # 2

City Philadelphia	State PA	Zip Code 19192-0002
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.27

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	06	/	2012

**Transaction ID : 20121207-2122-14-49**

Amount of Each Receipt this Period  
12.29

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	31.33
<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 71 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Moin M. Iftekhhar**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.27

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-2108-14-47**

Amount of Each Receipt this Period  
12.29

Full Name (Last, First, Middle Initial)  
**B. Alan Innes**

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Senior Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.50

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-1807-14-49**

Amount of Each Receipt this Period  
19.25

Full Name (Last, First, Middle Initial)  
**C. Alan Innes**

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Senior Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.50

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-1795-14-47**

Amount of Each Receipt this Period  
19.25

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.79

**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 72 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Abdul-Alim Issa</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-129-14-49</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 26.93
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 700.18
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Underwriting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Abdul-Alim Issa</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-126-14-47</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 26.93
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 700.18
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Underwriting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. John M. Jacobs</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-2914-14-49</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 25.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 250.00
Name of Employer Cigna Corporation	Occupation Senior Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	78.86
<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 73 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. John M. Jacobs**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corporation Occupation Senior Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-2896-14-47**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 400 N Brand Blvd

City Glendale State CA Zip Code 91203-2311

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-6529-14-49**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 400 N Brand Blvd

City Glendale State CA Zip Code 91203-2311

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-6494-14-47**

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 74 OF 175
	(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"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Nicole S. Jones</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121207-13227-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="192.00"/>
Name of Employer Cigna Corp.	Occupation EVP Genl Counsel & Pub Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4992.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Nicole S. Jones</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121218-13158-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="192.00"/>
Name of Employer Cigna Corp.	Occupation EVP Genl Counsel & Pub Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4992.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Scott Josephs</b>		Date of Receipt
Mailing Address 701 Corporate Center Dr		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City State Zip Code Raleigh NC 27607-5084		<b>Transaction ID : 20121207-7086-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
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 ▼ <input type="text" value="850.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="434.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 75 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Scott Josephs**

Mailing Address 701 Corporate Center Dr

City State Zip Code  
 Raleigh NC 27607-5084

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Medical Officer

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-7047-14-47**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**B. Shankar Kalyanasundaram**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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 ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-10244-14-49**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**C. Shankar Kalyanasundaram**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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 ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-10187-14-47**

Amount of Each Receipt this Period  
 25.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 76 OF 175
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. William C. Kane</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121207-12398-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Cigna Corp. Fixed Income Managing Director		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="260.00"/>

Full Name (Last, First, Middle Initial) <b>B. William C. Kane</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121218-12332-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Cigna Corp. Fixed Income Managing Director		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="260.00"/>

Full Name (Last, First, Middle Initial) <b>C. Rhonda M. Karlin</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121207-1785-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Cigna Corp. Assoc Chief Counsel		<input type="text" value="12.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="312.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="32.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 77 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Rhonda M. Karlin**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Assoc Chief Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 312.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-1773-14-47**

Amount of Each Receipt this Period  
 12.00

Full Name (Last, First, Middle Initial)  
**B. Benjamin Karsch**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Chief Marketing Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-18183-14-49**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**C. Benjamin Karsch**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Chief Marketing Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-18090-14-47**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 175
	<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. Benjamin W. Katz**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Front St

City San Francisco State CA Zip Code 94111-5325

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt  
**12 / 06 / 2012**  
Transaction ID : **20121207-6679-14-49**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 1 Front St

City San Francisco State CA Zip Code 94111-5325

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt  
**12 / 20 / 2012**  
Transaction ID : **20121218-6644-14-47**

Amount of Each Receipt this Period  
**50.00**

**C. Christopher P. Keefe**  
Full Name (Last, First, Middle Initial)

Mailing Address 8505 E Orchard Rd

City Greenwood Village State CO Zip Code 80111-5002

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

Name of Employer Cigna Corp. Occupation Financial Analysis Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
**12 / 06 / 2012**  
Transaction ID : **20121207-17767-14-49**

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 79 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Christopher P. Keefe**

Mailing Address 8505 E Orchard Rd

City Greenwood Village      State CO      Zip Code 80111-5002

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

Name of Employer Cigna Corp.      Occupation Financial Analysis Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-17675-14-47**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**B. Donna L. Keel**

Mailing Address 230 Citadel Dr

City Mount Juliet      State TN      Zip Code 37122-6160

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 213.44

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-5120-14-49**

Amount of Each Receipt this Period  
 9.62

Full Name (Last, First, Middle Initial)  
**C. Donna L. Keel**

Mailing Address 230 Citadel Dr

City Mount Juliet      State TN      Zip Code 37122-6160

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 213.44

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-5091-14-47**

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 80 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Joan Kennedy**

Mailing Address 9 NE Lofting Way

City State Zip Code  
 Stuart FL 34996-6512

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

Name of Employer Occupation  
 Cigna Corp. VP Consumer Health Engagement

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 640.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-25971-14-49**

Amount of Each Receipt this Period  
 160.00

Full Name (Last, First, Middle Initial)  
**B. Joan Kennedy**

Mailing Address 9 NE Lofting Way

City State Zip Code  
 Stuart FL 34996-6512

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

Name of Employer Occupation  
 Cigna Corp. VP Consumer Health Engagement

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 640.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-25788-14-47**

Amount of Each Receipt this Period  
 160.00

Full Name (Last, First, Middle Initial)  
**C. Sandra G. Kent**

Mailing Address 8306 Autumn Way

City State Zip Code  
 North Chesterfield VA 23235-4669

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 211.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-119-14-49**

Amount of Each Receipt this Period  
 8.14

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 328.14

**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 81 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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. Sandra G. Kent**  
Full Name (Last, First, Middle Initial)

Mailing Address 8306 Autumn Way

City North Chesterfield State VA Zip Code 23235-4669

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **211.64**

Date of Receipt **12 / 20 / 2012**

**Transaction ID : 20121218-117-14-47**

Amount of Each Receipt this Period **8.14**

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

Mailing Address 1600 W Carson St

City Pittsburgh State PA Zip Code 15219-1031

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 ▼ **260.00**

Date of Receipt **12 / 06 / 2012**

**Transaction ID : 20121207-2384-14-49**

Amount of Each Receipt this Period **10.00**

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

Mailing Address 1600 W Carson St

City Pittsburgh State PA Zip Code 15219-1031

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 ▼ **260.00**

Date of Receipt **12 / 20 / 2012**

**Transaction ID : 20121218-2368-14-47**

Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **28.14**

**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 OF 175  
(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. John M. Kissel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City Philadelphia State PA Zip Code 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation HR Operations Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 06 / 2012  
**Transaction ID : 20121207-11812-14-49**  
 Amount of Each Receipt this Period 15.00

**B. John M. Kissel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City Philadelphia State PA Zip Code 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation HR Operations Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 20 / 2012  
**Transaction ID : 20121218-11748-14-47**  
 Amount of Each Receipt this Period 15.00

**C. Ketav T. Kshatriya**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation App Development Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 06 / 2012  
**Transaction ID : 20121207-18760-14-49**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 83 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Ketav T. Kshatriya**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. App Development Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-18663-14-47**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**B. James Kucharczyk**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Strategic Sourcing Sr Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-22418-14-49**

Amount of Each Receipt this Period  
 75.00

Full Name (Last, First, Middle Initial)  
**C. James Kucharczyk**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Strategic Sourcing Sr Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-22263-14-47**

Amount of Each Receipt this Period  
 75.00

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

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

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

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

FOR LINE NUMBER: PAGE 84 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Diana L. Kycia**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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 ▼  
 380.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-942-14-49**

Amount of Each Receipt this Period  
 14.81

Full Name (Last, First, Middle Initial)  
**B. Diana L. Kycia**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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 ▼  
 380.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-936-14-47**

Amount of Each Receipt this Period  
 14.81

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Assoc Chief Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 775.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-1383-14-49**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 79.62

**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 85 OF 175
	(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"/> 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. Kenneth P. Langevin**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Assoc Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **775.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-1375-14-47**

Amount of Each Receipt this Period  
**50.00**

**B. Mary L. Lapoint**  
Full Name (Last, First, Middle Initial)

Mailing Address 10121 Mesa Arriba Ave NE

City Albuquerque State NM Zip Code 87111-4962

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

Name of Employer Cigna BEHAVIORAL HEALTH, INC. Occupation Quality Management Sr Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **219.15**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**

**Transaction ID : 20121207-6820-14-49**

Amount of Each Receipt this Period  
**8.48**

**C. Mary L. Lapoint**  
Full Name (Last, First, Middle Initial)

Mailing Address 10121 Mesa Arriba Ave NE

City Albuquerque State NM Zip Code 87111-4962

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

Name of Employer Cigna BEHAVIORAL HEALTH, INC. Occupation Quality Management Sr Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **219.15**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-6782-14-47**

Amount of Each Receipt this Period  
**8.48**

**SUBTOTAL** of Receipts This Page (optional)..... **66.96**

**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 87 OF 175  
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

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

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Internal Audit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1153.92

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-13419-14-47**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Alfredo Lathrop**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation VP Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-4029-14-49**

Amount of Each Receipt this Period  
10.00

Full Name (Last, First, Middle Initial)  
**C. Alfredo Lathrop**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation VP Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-4005-14-47**

Amount of Each Receipt this Period  
10.00

**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 88 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Lisa Lawrence**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2701 N Rocky Point Dr  
 City Tampa State FL Zip Code 33607-5917  
 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 ▼ 400.73

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-3395-14-49**  
 Amount of Each Receipt this Period  
 15.48

**B. Lisa Lawrence**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2701 N Rocky Point Dr  
 City Tampa State FL Zip Code 33607-5917  
 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 ▼ 400.73

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-3376-14-47**  
 Amount of Each Receipt this Period  
 15.48

**C. Susan L. Lawson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 N Brand Blvd  
 City Glendale State CA Zip Code 91203-2311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Client Account Support Sr Spec  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 219.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-6438-14-49**  
 Amount of Each Receipt this Period  
 8.45

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	39.41
<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 89 OF 175
	<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. Susan L. Lawson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 400 N Brand Blvd  
City Glendale State CA Zip Code 91203-2311  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Client Account Support Sr Spec  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 219.14

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-6402-14-47**  
Amount of Each Receipt this Period  
8.45

**B. Amy C. Lazzaro**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 Cottage Grove Rd  
City Hartford State CT Zip Code 06152-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cigna Corp. Occupation Government Affairs Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-25650-14-49**  
Amount of Each Receipt this Period  
50.00

**C. Amy C. Lazzaro**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 Cottage Grove Rd  
City Hartford State CT Zip Code 06152-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cigna Corp. Occupation Government Affairs Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-25469-14-47**  
Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 108.45  
**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 90 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Charles Levine</b>		Date of Receipt
Mailing Address 701 5th Ave Ste 4900		M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012
City Seattle	State WA	Zip Code 98104-7009
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20121207-2832-14-49</b>
Name of Employer CT GENERAL LIFE INSURANCE CO		Amount of Each Receipt this Period
Occupation Provider Contracting Director		9.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.12	

Full Name (Last, First, Middle Initial) <b>B. Charles Levine</b>		Date of Receipt
Mailing Address 701 5th Ave Ste 4900		M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012
City Seattle	State WA	Zip Code 98104-7009
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20121218-2815-14-47</b>
Name of Employer CT GENERAL LIFE INSURANCE CO		Amount of Each Receipt this Period
Occupation Provider Contracting Director		9.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.12	

Full Name (Last, First, Middle Initial) <b>C. Jeffrey D. Linstone</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20121207-930-14-49</b>
Name of Employer Cigna Corp.		Amount of Each Receipt this Period
Occupation Senior Counsel		8.59
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	221.90	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	27.83
<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 91 OF 175
	(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"/> 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. Jeffrey D. Linstone**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Senior Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.90**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-924-14-47**

Amount of Each Receipt this Period  
**8.59**

**B. Eric J. Luecht**  
Full Name (Last, First, Middle Initial)

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix State AZ Zip Code 85085-8200

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

Name of Employer Cigna HEALTHCARE OF AZ, INC Occupation Clinical Pharmacy Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**

**Transaction ID : 20121207-10481-14-49**

Amount of Each Receipt this Period  
**8.50**

**C. Eric J. Luecht**  
Full Name (Last, First, Middle Initial)

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix State AZ Zip Code 85085-8200

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

Name of Employer Cigna HEALTHCARE OF AZ, INC Occupation Clinical Pharmacy Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-10424-14-47**

Amount of Each Receipt this Period  
**8.50**

**SUBTOTAL** of Receipts This Page (optional)..... **25.59**

**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 92 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Stacie Lukasiak</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-8268-14-47</b>
Mailing Address 1000 Corporate Centre Dr		Amount of Each Receipt this Period 7.74
City Franklin	State TN	Zip Code 37067-2611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7.74
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.24	

Full Name (Last, First, Middle Initial) <b>B. Scott A. Macchi</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-842-14-49</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 30.00
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Business IT Sr Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>C. Scott A. Macchi</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-836-14-47</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 30.00
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Business IT Sr Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	67.74
<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 93 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

**A. Jon E. Maesner**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Clinical Program Sr Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-6390-14-49**

Amount of Each Receipt this Period  
**15.00**

**B. Jon E. Maesner**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Clinical Program Sr Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-6354-14-47**

Amount of Each Receipt this Period  
**15.00**

**C. William J. Maher**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-3353-14-49**

Amount of Each Receipt this Period  
**12.00**

**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 94 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. William J. Maher**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-3334-14-47**

Amount of Each Receipt this Period  
12.00

Full Name (Last, First, Middle Initial)  
**B. Matthew G. Manders**

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Pres Regional & Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4042.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-2153-14-49**

Amount of Each Receipt this Period  
192.00

Full Name (Last, First, Middle Initial)  
**c. Matthew G. Manders**

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Pres Regional & Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4042.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-2138-14-47**

Amount of Each Receipt this Period  
192.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 396.00

**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 OF 175  
(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. Carla C. Mangiafico**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Financial Analysis Sr Dir  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 494.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-273-14-49**  
 Amount of Each Receipt this Period  
 19.00

**B. Carla C. Mangiafico**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Financial Analysis Sr Dir  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 494.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-270-14-47**  
 Amount of Each Receipt this Period  
 19.00

**C. Mark P. Marsters**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City State Zip Code  
 Philadelphia PA 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LIFE INS. CO. OF NORTH AMERICA VP Service Operations  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-10395-14-49**  
 Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 113.00  
**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 OF 175  
(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**

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

Mailing Address 1601 Chestnut St  
 # 2

City Philadelphia      State PA      Zip Code 19192-0002

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-10338-14-47**

Amount of Each Receipt this Period  
 75.00

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

Mailing Address 2223 Washington St

City Newton      State MA      Zip Code 02462-1417

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 ▼  
 850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012

**Transaction ID : 20121207-10080-14-49**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 2223 Washington St

City Newton      State MA      Zip Code 02462-1417

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 ▼  
 850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-10027-14-47**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00

**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 97 OF 175
	<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. Treva K. Mattingly**  
Full Name (Last, First, Middle Initial)

Mailing Address 4616 S US Highway 75

City Denison State TX Zip Code 75020-4582

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Claims Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt 12 / 20 / 2012  
**Transaction ID : 20121218-5926-14-47**

Amount of Each Receipt this Period 8.00

**B. Thomas A. McCarthy**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 06 / 2012  
**Transaction ID : 20121207-9642-14-49**

Amount of Each Receipt this Period 50.00

**c. Thomas A. McCarthy**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 20 / 2012  
**Transaction ID : 20121218-9591-14-47**

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 108.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 OF 175
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Sheila McGinley-Graziosi</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121207-1453-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation CT GENERAL LIFE INSURANCE CO General Manager		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Sheila McGinley-Graziosi</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121218-1445-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation CT GENERAL LIFE INSURANCE CO General Manager		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Barry R. McHale</b>		Date of Receipt
Mailing Address 1601 Chestnut St # 2		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Philadelphia PA 19192-0002		<b>Transaction ID : 20121218-4357-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Cigna Corp. Treasury Senior Director		<input type="text" value="8.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="208.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="28.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Susan E. McMurray</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Hartford	CT	06152-0001
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20121207-490-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
CT GENERAL LIFE INSURANCE CO	Accounting Senior Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Susan E. McMurray</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code
Hartford	CT	06152-0001
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20121218-485-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
CT GENERAL LIFE INSURANCE CO	Accounting Senior Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Brian C. McNeil</b>		Date of Receipt
Mailing Address 255 Primera Blvd Ste 264		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Lake Mary	FL	32746-2148
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20121207-4765-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
CT GENERAL LIFE INSURANCE CO	Senior Account Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Brian C. McNeil</b>		Date of Receipt
Mailing Address 255 Primera Blvd Ste 264		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City Lake Mary State FL Zip Code 32746-2148		<b>Transaction ID : 20121218-4736-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Account Manager		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Mark J. McPhail</b>		Date of Receipt
Mailing Address 1640 Dallas Pkwy		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Plano State TX Zip Code 75093-4515		<b>Transaction ID : 20121207-5420-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Account Manager		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Mark J. McPhail</b>		Date of Receipt
Mailing Address 1640 Dallas Pkwy		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City Plano State TX Zip Code 75093-4515		<b>Transaction ID : 20121218-5391-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Account Manager		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 101 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Nancy A. Miley**

Mailing Address 1000 Corporate Centre Dr

City State Zip Code  
 Franklin TN 37067-2611

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Sales Administr Senior Analyst

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-10231-14-49**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**B. Nancy A. Miley**

Mailing Address 1000 Corporate Centre Dr

City State Zip Code  
 Franklin TN 37067-2611

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Sales Administr Senior Analyst

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-10174-14-47**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**C. Ronald E. Miller**

Mailing Address 7555 Goodwin Rd

City State Zip Code  
 Chattanooga TN 37421-3183

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 ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-5088-14-49**

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 102 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Ronald E. Miller</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-5059-14-47</b>
Mailing Address 7555 Goodwin Rd		Amount of Each Receipt this Period 10.00
City Chattanooga	State TN	Zip Code 37421-3183
FEC ID number of contributing federal political committee. C	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Claims Senior Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. David E. Mino</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-10451-14-49</b>
Mailing Address 103 Lafayette Dr		Amount of Each Receipt this Period 15.00
City Washington Crossin	State PA	Zip Code 18977-1413
FEC ID number of contributing federal political committee. C	Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Medical Senior Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) <b>C. David E. Mino</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-10394-14-47</b>
Mailing Address 103 Lafayette Dr		Amount of Each Receipt this Period 15.00
City Washington Crossin	State PA	Zip Code 18977-1413
FEC ID number of contributing federal political committee. C	Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Medical Senior Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<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 103 OF 175  
(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. Morris D. Mirabella**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2701 N Rocky Point Dr  
 City Tampa State FL Zip Code 33607-5917  
 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 ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-6843-14-49**  
 Amount of Each Receipt this Period  
 15.00

**B. Morris D. Mirabella**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2701 N Rocky Point Dr  
 City Tampa State FL Zip Code 33607-5917  
 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 ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-6805-14-47**  
 Amount of Each Receipt this Period  
 15.00

**C. Kymberly P. Miranda**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 520 SE 5th Ave  
 City Fort Lauderdale State FL Zip Code 33301-2932  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Account Manager-National Accts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-4674-14-49**  
 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 104 OF 175  
(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**

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

Mailing Address 520 SE 5th Ave

City State Zip Code  
 Fort Lauderdale FL 33301-2932

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

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

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-4645-14-47**

Amount of Each Receipt this Period  
 200.00

Full Name (Last, First, Middle Initial)  
**B. Jodie K. Mirfendereski**

Mailing Address 104 Glenlivet Pl

City State Zip Code  
 Powell OH 43065-9699

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Project Manager

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 319.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-3990-14-49**

Amount of Each Receipt this Period  
 12.38

Full Name (Last, First, Middle Initial)  
**C. Jodie K. Mirfendereski**

Mailing Address 104 Glenlivet Pl

City State Zip Code  
 Powell OH 43065-9699

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Project Manager

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 319.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-3966-14-47**

Amount of Each Receipt this Period  
 12.38

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 44.76

**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 105 OF 175  
(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. Melanie N. Monchick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 Corporate Center Dr  
 City Raleigh State NC Zip Code 27607-5084  
 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 ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-6566-14-49**  
 Amount of Each Receipt this Period  
 10.00

**B. Melanie N. Monchick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 Corporate Center Dr  
 City Raleigh State NC Zip Code 27607-5084  
 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 ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-6531-14-47**  
 Amount of Each Receipt this Period  
 10.00

**C. Michael W. Moran**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 525 W Monroe St  
 City Chicago State IL Zip Code 60661-3629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-18751-14-47**  
 Amount of Each Receipt this Period  
 8.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 28.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 175
	<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. Alan M. Muney**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Total Med/Chief Med Off

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1925.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-19643-14-49**

Amount of Each Receipt this Period  
 175.00

**B. Alan M. Muney**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Total Med/Chief Med Off

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1925.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-19539-14-47**

Amount of Each Receipt this Period  
 175.00

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

Mailing Address Two Securities Centre

City Atlanta State GA Zip Code 30305

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 ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-2236-14-49**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00

**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 107 OF 175
	<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. Kenneth W. Munkel**  
Full Name (Last, First, Middle Initial)

Mailing Address Two Securities Centre

City Atlanta State GA Zip Code 30305

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 ▼ **260.00**

Date of Receipt **12 / 20 / 2012**

**Transaction ID : 20121218-2220-14-47**

Amount of Each Receipt this Period **100.00**

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

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation EVP Human Resources & Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2600.00**

Date of Receipt **12 / 06 / 2012**

**Transaction ID : 20121207-10699-14-49**

Amount of Each Receipt this Period **100.00**

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

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation EVP Human Resources & Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2600.00**

Date of Receipt **12 / 20 / 2012**

**Transaction ID : 20121218-10641-14-47**

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: (check only one)	PAGE 108 OF 175
	<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. John M. Murphy**  
Full Name (Last, First, Middle Initial)

Mailing Address 255 Primera Blvd  
Ste 264

City Lake Mary State FL Zip Code 32746-2148

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt  
**12 / 06 / 2012**  
Transaction ID : **20121207-8382-14-49**

Amount of Each Receipt this Period  
**12.00**

**B. John M. Murphy**  
Full Name (Last, First, Middle Initial)

Mailing Address 255 Primera Blvd  
Ste 264

City Lake Mary State FL Zip Code 32746-2148

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt  
**12 / 20 / 2012**  
Transaction ID : **20121218-8336-14-47**

Amount of Each Receipt this Period  
**12.00**

**C. Paula Murphy**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
**12 / 06 / 2012**  
Transaction ID : **20121207-4639-14-49**

Amount of Each Receipt this Period  
**35.00**

**SUBTOTAL** of Receipts This Page (optional)..... **59.00**

**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 109 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Paula Murphy**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Hartford CT 06152-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**700.00**

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-4610-14-47**

Amount of Each Receipt this Period  
**350.00**

Full Name (Last, First, Middle Initial)  
**B. Noreen Nageotte**

Mailing Address 3 Summit Park Dr

City State Zip Code  
Independence OH 44131-2599

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1015.00**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-7330-14-49**

Amount of Each Receipt this Period  
**75.00**

Full Name (Last, First, Middle Initial)  
**C. Noreen Nageotte**

Mailing Address 3 Summit Park Dr

City State Zip Code  
Independence OH 44131-2599

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1015.00**

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-7288-14-47**

Amount of Each Receipt this Period  
**75.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **185.00**

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

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

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

FOR LINE NUMBER: PAGE 110 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Debra L. Nagy**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Strategic Sourcing Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-23129-14-47**

Amount of Each Receipt this Period  
 8.00

Full Name (Last, First, Middle Initial)  
**B. Mark F. Nai**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Architecture Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-398-14-47**

Amount of Each Receipt this Period  
 8.00

Full Name (Last, First, Middle Initial)  
**c. Marc C. Neely**

Mailing Address 5445 Dtc Pkwy  
 Ste 400

City State Zip Code  
 Greenwood Village CO 80111-3048

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

Name of Employer Occupation  
 Cigna Corp. Sales Director-Direct Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-16376-14-49**

Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 91.00

**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 111 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Marc C. Neely**

Mailing Address 5445 Dtc Pkwy  
 Ste 400

City Greenwood Village      State CO      Zip Code 80111-3048

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

Name of Employer Cigna Corp.      Occupation Sales Director-Direct Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-16287-14-47**

Amount of Each Receipt this Period  
 75.00

Full Name (Last, First, Middle Initial)  
**B. Ralph J. Nicoletti**

Mailing Address 597 Regency Dr

City Lake Zurich      State IL      Zip Code 60047-3100

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

Name of Employer Cigna Corp.      Occupation EVP CFO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3072.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-22725-14-49**

Amount of Each Receipt this Period  
 192.00

Full Name (Last, First, Middle Initial)  
**C. Ralph J. Nicoletti**

Mailing Address 597 Regency Dr

City Lake Zurich      State IL      Zip Code 60047-3100

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

Name of Employer Cigna Corp.      Occupation EVP CFO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 3072.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-22567-14-47**

Amount of Each Receipt this Period  
 192.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 459.00

**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 112 OF 175  
(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. Daniel Nicoll**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 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 ▼ 700.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-2050-14-49**  
 Amount of Each Receipt this Period  
 26.93

**B. Daniel Nicoll**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 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 ▼ 700.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-2036-14-47**  
 Amount of Each Receipt this Period  
 26.93

**C. Eliana Nunez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operating Effectiveness Sr Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 839.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-1234-14-49**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 103.86  
**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 113 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Eliana Nunez</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-1226-14-47</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 50.00
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operating Effectiveness Sr Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 839.84	

Full Name (Last, First, Middle Initial) <b>B. Ana C. O'Donnell</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-17859-14-49</b>
Mailing Address 214 Bridge St		Amount of Each Receipt this Period 8.00
City Collegeville	State PA	Zip Code 19426-1612
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Sales/Mktg Comm Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Ana C. O'Donnell</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-17766-14-47</b>
Mailing Address 214 Bridge St		Amount of Each Receipt this Period 8.00
City Collegeville	State PA	Zip Code 19426-1612
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Sales/Mktg Comm Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	66.00
<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 114 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Kathleen M. O'Neil**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Business Project Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-1705-14-49**

Amount of Each Receipt this Period  
 15.00

Full Name (Last, First, Middle Initial)  
**B. Kathleen M. O'Neil**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Business Project Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-1693-14-47**

Amount of Each Receipt this Period  
 15.00

Full Name (Last, First, Middle Initial)  
**C. John Oates**

Mailing Address 11712 Emerald Falls Dr

City State Zip Code  
 Austin TX 78738-5329

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

Name of Employer Occupation  
 Cigna Corp. Compliance Sr Dir

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1199.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-13149-14-49**

Amount of Each Receipt this Period  
 46.15

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 76.15

**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 115 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. John Oates**

Mailing Address 11712 Emerald Falls Dr

City State Zip Code  
 Austin TX 78738-5329

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

Name of Employer Occupation  
 Cigna Corp. Compliance Sr Dir

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1199.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-13080-14-47**

Amount of Each Receipt this Period  
 46.15

Full Name (Last, First, Middle Initial)  
**B. Katherine Overbye**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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 ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-1434-14-49**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**C. Katherine Overbye**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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 ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-1426-14-47**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 66.15

**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 116 OF 175  
(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**

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

Mailing Address 8505 E Orchard Rd

City State Zip Code  
 Greenwood Village CO 80111-5002

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

Name of Employer Occupation  
 Cigna Corp. App Development Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-16425-14-49**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 8505 E Orchard Rd

City State Zip Code  
 Greenwood Village CO 80111-5002

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

Name of Employer Occupation  
 Cigna Corp. App Development Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-16337-14-47**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**C. Eric P. Palmer**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Business Financial Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-5955-14-49**

Amount of Each Receipt this Period  
 50.00

**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 117 OF 175
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Eric P. Palmer**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Hartford CT 06152-0001

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

Name of Employer Occupation  
Cigna Corp. Business Financial Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**800.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-5924-14-47**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. Jeffery P. Panter**

Mailing Address 7555 Goodwin Rd

City State Zip Code  
Chattanooga TN 37421-3183

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 ▼  
**500.50**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**

**Transaction ID : 20121207-4926-14-49**

Amount of Each Receipt this Period  
**19.25**

Full Name (Last, First, Middle Initial)  
**C. Jeffery P. Panter**

Mailing Address 7555 Goodwin Rd

City State Zip Code  
Chattanooga TN 37421-3183

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 ▼  
**500.50**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-4897-14-47**

Amount of Each Receipt this Period  
**19.25**

**SUBTOTAL** of Receipts This Page (optional)..... **88.50**

**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: (check only one)	PAGE 118 OF 175
	<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. Charlene Parsons**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Talent Optimization

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3180.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-11070-14-49**

Amount of Each Receipt this Period  
160.00

**B. Charlene Parsons**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Talent Optimization

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3180.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-11011-14-47**

Amount of Each Receipt this Period  
160.00

**C. Mark A. Parsons**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼  
1040.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-465-14-49**

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00

**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 OF 175  
(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**

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO SVP Reinsurance

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1040.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-460-14-47**

Amount of Each Receipt this Period  
 40.00

Full Name (Last, First, Middle Initial)  
**B. Raymond H. Perry**

Mailing Address 1601 Chestnut St # 2

City State Zip Code  
 Philadelphia PA 19192-0002

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

Name of Employer Occupation  
 Cigna Corporation Financial Analysis Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012

**Transaction ID : 20121207-2190-14-49**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. Raymond H. Perry**

Mailing Address 1601 Chestnut St # 2

City State Zip Code  
 Philadelphia PA 19192-0002

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

Name of Employer Occupation  
 Cigna Corporation Financial Analysis Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-2175-14-47**

Amount of Each Receipt this Period  
 50.00

**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 120 OF 175
	<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. Danthu T. Phan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St # 2  
City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corporation Occupation VP Chief Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-11566-14-49**

Amount of Each Receipt this Period  
50.00

**B. Danthu T. Phan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St # 2  
City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corporation Occupation VP Chief Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-11504-14-47**

Amount of Each Receipt this Period  
50.00

**C. Dung A. Phan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St # 2  
City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna INTERNATIONAL SVCS., INC Occupation Actuarial Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-6831-14-49**

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: (check only one)	PAGE 121 OF 175
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

**A. Dung A. Phan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St # 2  
City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna INTERNATIONAL SVCS., INC Occupation Actuarial Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-6793-14-47**

Amount of Each Receipt this Period  
10.00

**B. Kim A. Phillips**  
Full Name (Last, First, Middle Initial)

Mailing Address 5310 E High St  
City Phoenix State AZ Zip Code 85054-5469

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 ▼ 200.20

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-6251-14-47**

Amount of Each Receipt this Period  
7.70

**C. Robert D. Picinich**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St # 2  
City Philadelphia State PA Zip Code 19192-0002

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 ▼ 430.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-2144-14-49**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 42.70

**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 122 OF 175
	<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. Robert D. Picinich**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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 ▼ 430.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-2130-14-47**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 11016 Rushmore Dr

City Charlotte State NC Zip Code 28277-3474

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

Name of Employer Cigna Corp. Occupation General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 503.06

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-13370-14-49**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 11016 Rushmore Dr

City Charlotte State NC Zip Code 28277-3474

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

Name of Employer Cigna Corp. Occupation General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 503.06

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-13301-14-47**

Amount of Each Receipt this Period  
20.00

**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 123 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Sue Podbielski</b>		Date of Receipt
Mailing Address 525 W Monroe St		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Chicago State IL Zip Code 60661-3629		<b>Transaction ID : 20121207-14757-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna Corporation Occupation General Manager		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Sue Podbielski</b>		Date of Receipt
Mailing Address 525 W Monroe St		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City Chicago State IL Zip Code 60661-3629		<b>Transaction ID : 20121218-14681-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna Corporation Occupation General Manager		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) <b>C. David M. Porcello</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Hartford State CT Zip Code 06152-0001		<b>Transaction ID : 20121207-1333-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna Corp. Occupation VP Tax		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="780.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="130.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 124 OF 175
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. David M. Porcello</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121218-1325-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Cigna Corp. VP Tax		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="780.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Thomas F. Prevost</b>		Date of Receipt
Mailing Address Bradley Airport Hangar 85-176		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City State Zip Code Windsor Locks CT 06096		<b>Transaction ID : 20121207-338-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Aviation Director		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Thomas F. Prevost</b>		Date of Receipt
Mailing Address Bradley Airport Hangar 85-176		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Windsor Locks CT 06096		<b>Transaction ID : 20121218-335-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Aviation Director		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Jonathan M. Prokup**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation Senior Counsel

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-25472-14-49**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Jonathan M. Prokup**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation Senior Counsel

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-25296-14-47**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Philip Rabinowitz**

Mailing Address 3200 Park Lane Dr

City Pittsburgh State PA Zip Code 15275-1117

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

Name of Employer Cigna Corporation Occupation Medical Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-12437-14-49**

Amount of Each Receipt this Period  
40.00

**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 126 OF 175
	<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. Philip Rabinowitz**  
Full Name (Last, First, Middle Initial)

Mailing Address 3200 Park Lane Dr

City Pittsburgh State PA Zip Code 15275-1117

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

Name of Employer Cigna Corporation Occupation Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-12370-14-47**

Amount of Each Receipt this Period  
**40.00**

**B. Eugene J. Rapisardi**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 N Brand Blvd

City Glendale State CA Zip Code 91203-2311

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

Name of Employer Cigna Corp. Occupation General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**

**Transaction ID : 20121207-15173-14-49**

Amount of Each Receipt this Period  
**10.00**

**C. Eugene J. Rapisardi**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 N Brand Blvd

City Glendale State CA Zip Code 91203-2311

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

Name of Employer Cigna Corp. Occupation General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**

**Transaction ID : 20121218-15092-14-47**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 175
	<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. John F. Rausch**  
Full Name (Last, First, Middle Initial)

Mailing Address 14615 N 12th St

City Phoenix State AZ Zip Code 85022-3810

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 ▼ 250.12

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-6029-14-49**

Amount of Each Receipt this Period  
9.62

**B. John F. Rausch**  
Full Name (Last, First, Middle Initial)

Mailing Address 14615 N 12th St

City Phoenix State AZ Zip Code 85022-3810

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 ▼ 250.12

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-5997-14-47**

Amount of Each Receipt this Period  
9.62

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

Mailing Address 401 Chestnut St

City Chattanooga State TN Zip Code 37402-4924

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 ▼ 500.50

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-11023-14-49**

Amount of Each Receipt this Period  
19.25

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 38.49

**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: (check only one)	PAGE 128 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Michael J. Raybeck</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-10964-14-47</b>
Mailing Address 401 Chestnut St		Amount of Each Receipt this Period 19.25
City Chattanooga	State TN	Zip Code 37402-4924
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 ▼ 500.50	

Full Name (Last, First, Middle Initial) <b>B. William J. Reedy</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-5885-14-49</b>
Mailing Address Stapley Corporate Center		Amount of Each Receipt this Period 20.00
City Mesa	State AZ	Zip Code 85204
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna HEALTHCARE OF AZ, INC	Occupation Urgent Care Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. William J. Reedy</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-5855-14-47</b>
Mailing Address Stapley Corporate Center		Amount of Each Receipt this Period 20.00
City Mesa	State AZ	Zip Code 85204
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna HEALTHCARE OF AZ, INC	Occupation Urgent Care Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	59.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 175
	<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. Brett A. Reinholz**  
Full Name (Last, First, Middle Initial)

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Administration Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-4177-14-49**

Amount of Each Receipt this Period  
**15.00**

**B. Brett A. Reinholz**  
Full Name (Last, First, Middle Initial)

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Administration Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-4151-14-47**

Amount of Each Receipt this Period  
**15.00**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Segment Lead

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-663-14-49**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **55.00**

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

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

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

FOR LINE NUMBER: PAGE 130 OF 175  
(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**

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Segment Lead

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-657-14-47**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**B. Nancy E. Richmond**

Mailing Address 3200 Park Lane Dr

City State Zip Code  
 Pittsburgh PA 15275-1117

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Clinical Program Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012

**Transaction ID : 20121207-3134-14-49**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**C. Nancy E. Richmond**

Mailing Address 3200 Park Lane Dr

City State Zip Code  
 Pittsburgh PA 15275-1117

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Clinical Program Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-3115-14-47**

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: (check only one)	PAGE 131 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey T. Rigg</b>		Date of Receipt
Mailing Address 1601 Chestnut St # 2		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Philadelphia State PA Zip Code 19192-0002		<b>Transaction ID : 20121207-22172-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna Corp. Occupation VP BFO International		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="2600.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Jeffrey T. Rigg</b>		Date of Receipt
Mailing Address 1601 Chestnut St # 2		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City Philadelphia State PA Zip Code 19192-0002		<b>Transaction ID : 20121218-22018-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna Corp. Occupation VP BFO International		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="2600.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Catherine M. Riley</b>		Date of Receipt
Mailing Address 4000 Faber Place Dr		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Charleston State SC Zip Code 29405-8585		<b>Transaction ID : 20121207-2116-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Senior Director		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="975.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 132 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Catherine M. Riley**

Mailing Address 4000 Faber Place Dr

City Charleston    State SC    Zip Code 29405-8585

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 ▼ **975.00**

Date of Receipt  
**12 / 20 / 2012**  
**Transaction ID : 20121218-2102-14-47**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. Cathryn Riley**

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix    State AZ    Zip Code 85085-8200

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

Name of Employer Cigna Corp.    Occupation Operations Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
**12 / 06 / 2012**  
**Transaction ID : 20121207-18276-14-49**

Amount of Each Receipt this Period  
**20.00**

Full Name (Last, First, Middle Initial)  
**C. Cathryn Riley**

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix    State AZ    Zip Code 85085-8200

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

Name of Employer Cigna Corp.    Occupation Operations Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
**12 / 20 / 2012**  
**Transaction ID : 20121218-18182-14-47**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **90.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Christopher A. Rodriguez</b>		Date of Receipt
Mailing Address 2701 N Rocky Point Dr		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City Tampa State FL Zip Code 33607-5917		<b>Transaction ID : 20121218-6820-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager		<input type="text" value="8.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="208.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Efrain Rosado</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City Hartford State CT Zip Code 06152-0001		<b>Transaction ID : 20121218-6778-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Informatics Senior Specialist		<input type="text" value="7.70"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="200.20"/>	

Full Name (Last, First, Middle Initial) <b>C. Michael J. Ross</b>		Date of Receipt
Mailing Address 1601 Chestnut St # 2		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Philadelphia State PA Zip Code 19192-0002		<b>Transaction ID : 20121207-9662-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation VP General Manager Intl		<input type="text" value="96.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2496.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="111.70"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Michael J. Ross</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-9611-14-47</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 96.00
City Philadelphia	State PA	
	Zip Code 19192-0002	
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation VP General Manager Intl	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	

Full Name (Last, First, Middle Initial) <b>B. Nancy F. Ruffino</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-1061-14-49</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 10.00
City Hartford	State CT	
	Zip Code 06152-0001	
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Accounting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Nancy F. Ruffino</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-1054-14-47</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 10.00
City Hartford	State CT	
	Zip Code 06152-0001	
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Accounting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	116.00
<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 135 OF 175  
(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. David A. Russell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. Actuarial Senior Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-1934-14-49**  
 Amount of Each Receipt this Period  
 10.00

**B. David A. Russell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. Actuarial Senior Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-1921-14-47**  
 Amount of Each Receipt this Period  
 10.00

**C. Thomas M. Sakorafis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 938 McDonald Dr  
 City State Zip Code  
 Northville MI 48167-1071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Account Manager-National Accts  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-4630-14-49**  
 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 136 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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**

Full Name (Last, First, Middle Initial) <b>A. Thomas M. Sakorafis</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-4601-14-47</b>
Mailing Address 938 McDonald Dr		Amount of Each Receipt this Period 10.00
City Northville	State MI	
Zip Code 48167-1071		Aggregate Year-to-Date ▼ 260.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Account Manager-National Accts	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Richard B. Salmon</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-1957-14-49</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 30.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 780.00
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) ▼

Full Name (Last, First, Middle Initial) <b>C. Richard B. Salmon</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-1944-14-47</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 30.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 780.00
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) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<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: (check only one)	PAGE 137 OF 175
	<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. Paul A. Sanford**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation VP Operating Effectiveness

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **924.00**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-8303-14-49**

Amount of Each Receipt this Period **154.00**

**B. Paul A. Sanford**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation VP Operating Effectiveness

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **924.00**

Date of Receipt **12 / 20 / 2012**  
**Transaction ID : 20121218-8258-14-47**

Amount of Each Receipt this Period **154.00**

**C. David N. Sasportas**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Project Management Sr Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-406-14-49**

Amount of Each Receipt this Period **50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **358.00**

**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 138 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. David N. Sasportas</b>			Date of Receipt
Mailing Address 900 Cottage Grove Rd			<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20121218-403-14-47</b>
Hartford	CT	06152-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="50.00"/>
Name of Employer	Occupation		
CT GENERAL LIFE INSURANCE CO	Project Management Sr Director		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="880.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Frank Sataline</b>			Date of Receipt
Mailing Address 900 Cottage Grove Rd			<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20121207-466-14-49</b>
Hartford	CT	06152-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="85.00"/>
Name of Employer	Occupation		
CT GENERAL LIFE INSURANCE CO	SVP Chief Investment Officer		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Frank Sataline</b>			Date of Receipt
Mailing Address 900 Cottage Grove Rd			<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20121218-461-14-47</b>
Hartford	CT	06152-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="85.00"/>
Name of Employer	Occupation		
CT GENERAL LIFE INSURANCE CO	SVP Chief Investment Officer		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="220.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. David A. Savino</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-628-14-49</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 25.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 650.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Strategic Sourcing Sr Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. David A. Savino</b>		Date of Receipt 12 / 20 / 2012 <b>Transaction ID : 20121218-622-14-47</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 25.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 650.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Strategic Sourcing Sr Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Randy Savona</b>		Date of Receipt 12 / 06 / 2012 <b>Transaction ID : 20121207-10366-14-49</b>
Mailing Address 3900 E Mexico Ave Ste 1100		Amount of Each Receipt this Period 10.00
City Denver	State CO	
Zip Code 80210-3946		Aggregate Year-to-Date ▼ 260.00
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) ▼

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

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

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

FOR LINE NUMBER: PAGE 140 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Randy Savona**

Mailing Address 3900 E Mexico Ave  
 Ste 1100

City State Zip Code  
 Denver CO 80210-3946

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 ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-10309-14-47**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**B. Frederick E. Scardelletto**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

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

Name of Employer Occupation  
 INT'L REHAB. ASSOCIATES, INC. Provider Contracting Sr Dir

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : 20121218-2951-14-47**

Amount of Each Receipt this Period  
 15.00

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

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012

**Transaction ID : 20121207-1412-14-49**

Amount of Each Receipt this Period  
 20.00

**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 141 OF 175  
(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**

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

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-1404-14-47**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**B. Scott D. Schneider**

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼  
247.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-4199-14-49**

Amount of Each Receipt this Period  
9.50

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼  
247.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-4173-14-47**

Amount of Each Receipt this Period  
9.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 39.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 175
	<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. Ann Servais**  
Full Name (Last, First, Middle Initial)  
Mailing Address 499 Washington Blvd  
City Jersey City State NJ Zip Code 07310-1995  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Sales Representative  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **234.00**

Date of Receipt  
**12 / 06 / 2012**  
**Transaction ID : 20121207-2227-14-49**  
Amount of Each Receipt this Period  
**9.00**

**B. Ann Servais**  
Full Name (Last, First, Middle Initial)  
Mailing Address 499 Washington Blvd  
City Jersey City State NJ Zip Code 07310-1995  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Sales Representative  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **234.00**

Date of Receipt  
**12 / 20 / 2012**  
**Transaction ID : 20121218-2211-14-47**  
Amount of Each Receipt this Period  
**9.00**

**C. Ralph V. Shapiro**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 Cottage Grove Rd  
City Hartford State CT Zip Code 06152-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cigna Corp. Occupation Business Analysis Sr Spec  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **260.00**

Date of Receipt  
**12 / 06 / 2012**  
**Transaction ID : 20121207-13277-14-49**  
Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **28.00**  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 143 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Ralph V. Shapiro**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Business Analysis Sr Spec

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 12 / 20 / 2012  
**Transaction ID : 20121218-13208-14-47**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 3900 E Mexico Ave  
 Ste 1100

City State Zip Code  
 Denver CO 80210-3946

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

Name of Employer Occupation  
 Cigna Corp. Sales Director-Direct Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.50

Date of Receipt  
 12 / 06 / 2012  
**Transaction ID : 20121207-14079-14-49**

Amount of Each Receipt this Period  
 19.25

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

Mailing Address 3900 E Mexico Ave  
 Ste 1100

City State Zip Code  
 Denver CO 80210-3946

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

Name of Employer Occupation  
 Cigna Corp. Sales Director-Direct Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.50

Date of Receipt  
 12 / 20 / 2012  
**Transaction ID : 20121218-14009-14-47**

Amount of Each Receipt this Period  
 19.25

**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 144 OF 175  
(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. Kenneth R. Silvay**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Accounting Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 248.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-1034-14-49**  
 Amount of Each Receipt this Period  
 20.00

**B. Kenneth R. Silvay**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Accounting Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 248.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-1028-14-47**  
 Amount of Each Receipt this Period  
 20.00

**C. Nancy Small**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Business Project Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-455-14-47**  
 Amount of Each Receipt this Period  
 8.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 48.00  
**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 OF 175  
(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. David B. Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7555 Goodwin Rd  
 City Chattanooga State TN Zip Code 37421-3183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation IT Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-10495-14-49**  
 Amount of Each Receipt this Period  
 10.00

**B. David B. Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7555 Goodwin Rd  
 City Chattanooga State TN Zip Code 37421-3183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation IT Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-10438-14-47**  
 Amount of Each Receipt this Period  
 10.00

**C. Raymond Smithberger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 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 ▼ 500.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-10627-14-49**  
 Amount of Each Receipt this Period  
 19.25

**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 146 OF 175  
(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. Raymond Smithberger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 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 ▼ 500.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-10569-14-47**  
 Amount of Each Receipt this Period  
 19.25

**B. Kenneth Stapleton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7555 Goodwin Rd  
 City Chattanooga State TN Zip Code 37421-3183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation HR Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-10727-14-49**  
 Amount of Each Receipt this Period  
 19.25

**C. Kenneth Stapleton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7555 Goodwin Rd  
 City Chattanooga State TN Zip Code 37421-3183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation HR Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-10669-14-47**  
 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 147 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Marjorie G. Stein</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-2043-14-49</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 12.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 312.00
Name of Employer Cigna Corp.	Occupation Employee Relations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Marjorie G. Stein</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-2029-14-47</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 12.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 312.00
Name of Employer Cigna Corp.	Occupation Employee Relations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Todd J. Stephens</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-5101-14-49</b>
Mailing Address 25500 N Norterra Dr Bldg B		Amount of Each Receipt this Period 10.00
City Phoenix	State AZ Zip Code 85085-8200	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 260.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation App Development Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	34.00
<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: (check only one)	PAGE 148 OF 175
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Todd J. Stephens**

Mailing Address 25500 N Norterra Dr  
Bldg B

City Phoenix State AZ Zip Code 85085-8200

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-5072-14-47**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address One Penn Mark Plaza

City Carmel State IN Zip Code 46032

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 ▼ **763.97**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-4141-14-49**

Amount of Each Receipt this Period  
**6.31**

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

Mailing Address One Penn Mark Plaza

City Carmel State IN Zip Code 46032

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 ▼ **763.97**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-4116-14-47**

Amount of Each Receipt this Period  
**6.31**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **22.62**

**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 149 OF 175
	<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. Mark D. Still**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 Hillside St

City Yarmouth State ME Zip Code 04096-8379

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 ▼ 260.00

Date of Receipt 12 / 06 / 2012  
**Transaction ID : 20121207-226-14-49**

Amount of Each Receipt this Period 10.00

**B. Mark D. Still**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 Hillside St

City Yarmouth State ME Zip Code 04096-8379

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 ▼ 260.00

Date of Receipt 12 / 20 / 2012  
**Transaction ID : 20121218-223-14-47**

Amount of Each Receipt this Period 10.00

**C. John Stroemer**  
Full Name (Last, First, Middle Initial)

Mailing Address 11095 Viking Dr

City Eden Prairie State MN Zip Code 55344-7223

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

Name of Employer Cigna Corp. Occupation Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 06 / 2012  
**Transaction ID : 20121207-18264-14-49**

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 150 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

**A. John Stroemer**  
Full Name (Last, First, Middle Initial)

Mailing Address 11095 Viking Dr

City Eden Prairie State MN Zip Code 55344-7223

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

Name of Employer Cigna Corp. Occupation Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt  
**12 / 20 / 2012**

**Transaction ID : 20121218-18170-14-47**

Amount of Each Receipt this Period  
**200.00**

**B. Cheryl L. Studier-Guthman**  
Full Name (Last, First, Middle Initial)

Mailing Address 4400 Comet Trl

City Hixson State TN Zip Code 37343-4308

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Client Account Support Sr Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.20**

Date of Receipt  
**12 / 20 / 2012**

**Transaction ID : 20121218-4630-14-47**

Amount of Each Receipt this Period  
**7.70**

**C. Daniel M. Sullivan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1000 Corporate Centre Dr

City Franklin State TN Zip Code 37067-2611

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 ▼ **390.00**

Date of Receipt  
**12 / 06 / 2012**

**Transaction ID : 20121207-1631-14-49**

Amount of Each Receipt this Period  
**15.00**

**SUBTOTAL** of Receipts This Page (optional)..... **42.70**

**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 151 OF 175
	<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. Daniel M. Sullivan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1000 Corporate Centre Dr

City Franklin State TN Zip Code 37067-2611

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 ▼ **390.00**

Date of Receipt **12 / 20 / 2012**  
**Transaction ID : 20121218-1622-14-47**

Amount of Each Receipt this Period **15.00**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ **700.18**

Date of Receipt **12 / 06 / 2012**  
**Transaction ID : 20121207-11237-14-49**

Amount of Each Receipt this Period **26.93**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ **700.18**

Date of Receipt **12 / 20 / 2012**  
**Transaction ID : 20121218-11176-14-47**

Amount of Each Receipt this Period **26.93**

**SUBTOTAL** of Receipts This Page (optional)..... **68.86**

**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 152 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Mark S. Swayne**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Hartford CT 06152-0001

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

Name of Employer Occupation  
Cigna Corp. Marketing Comm Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.80

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2012  
**Transaction ID : 20121207-1568-14-49**

Amount of Each Receipt this Period  
8.80

Full Name (Last, First, Middle Initial)  
**B. Mark S. Swayne**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Hartford CT 06152-0001

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

Name of Employer Occupation  
Cigna Corp. Marketing Comm Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.80

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2012  
**Transaction ID : 20121218-1560-14-47**

Amount of Each Receipt this Period  
8.80

Full Name (Last, First, Middle Initial)  
**c. Shelly Swinford**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Hartford CT 06152-0001

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 ▼  
477.80

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2012  
**Transaction ID : 20121207-4123-14-49**

Amount of Each Receipt this Period  
18.47

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 36.07

**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 153 OF 175
	<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. Shelly Swinford**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ **477.80**

Date of Receipt **12 / 20 / 2012**

**Transaction ID : 20121218-4098-14-47**

Amount of Each Receipt this Period **18.47**

**B. Jan C. Sykes**  
Full Name (Last, First, Middle Initial)

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix State AZ Zip Code 85085-8200

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

Name of Employer Cigna HEALTHCARE OF AZ, INC Occupation Operations Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **580.00**

Date of Receipt **12 / 06 / 2012**

**Transaction ID : 20121207-8625-14-49**

Amount of Each Receipt this Period **50.00**

**c. Jan C. Sykes**  
Full Name (Last, First, Middle Initial)

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix State AZ Zip Code 85085-8200

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

Name of Employer Cigna HEALTHCARE OF AZ, INC Occupation Operations Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **580.00**

Date of Receipt **12 / 20 / 2012**

**Transaction ID : 20121218-8578-14-47**

Amount of Each Receipt this Period **50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **118.47**

**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 154 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Kari C. Tamburin**

Mailing Address PO Box 637

City Gunter State TX Zip Code 75058-0637

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Clinical Program Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**  
**Transaction ID : 20121218-5694-14-47**

Amount of Each Receipt this Period  
**8.00**

Full Name (Last, First, Middle Initial)  
**B. Jeff S. Terrill**

Mailing Address 5310 E High St

City Phoenix State AZ Zip Code 85054-5469

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 ▼ **520.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2012**  
**Transaction ID : 20121207-7987-14-49**

Amount of Each Receipt this Period  
**20.00**

Full Name (Last, First, Middle Initial)  
**C. Jeff S. Terrill**

Mailing Address 5310 E High St

City Phoenix State AZ Zip Code 85054-5469

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 ▼ **520.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2012**  
**Transaction ID : 20121218-7942-14-47**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **48.00**

**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 OF 175
	<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. Jeffrey Thackeray**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ **361.16**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-217-14-49**

Amount of Each Receipt this Period  
**10.00**

**B. Jeffrey Thackeray**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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 ▼ **361.16**

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-214-14-47**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 1640 Dallas Pkwy

City Plano State TX Zip Code 75093-4515

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-10591-14-49**

Amount of Each Receipt this Period  
**50.00**

**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 OF 175  
(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. Doryne Thomas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1640 Dallas Pkwy  
 City Plano State TX Zip Code 75093-4515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LIFE INS. CO. OF NORTH AMERICA Operations Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-10533-14-47**  
 Amount of Each Receipt this Period  
 50.00

**B. Patrick H. Thompson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Real Estate Managing Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-186-14-47**  
 Amount of Each Receipt this Period  
 7.70

**C. Winnola E. Thompson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7287 E Earll Dr  
 City Scottsdale State AZ Zip Code 85251-7230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna HEALTHCARE OF AZ, INC Medical Admin Specialist  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 209.81

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-6214-14-49**  
 Amount of Each Receipt this Period  
 8.11

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 65.81  
**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 OF 175  
(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. Winnola E. Thompson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7287 E Earll Dr  
 City State Zip Code  
 Scottsdale AZ 85251-7230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna HEALTHCARE OF AZ, INC Medical Admin Specialist  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 209.81

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-6179-14-47**  
 Amount of Each Receipt this Period  
 8.11

**B. Jeffrey E. Tindall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. Government Affairs Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-11434-14-49**  
 Amount of Each Receipt this Period  
 20.00

**C. Jeffrey E. Tindall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. Government Affairs Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-11373-14-47**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 48.11  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 158 OF 175  
(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. Viktoriya Torchinsky-Field**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City Philadelphia State PA Zip Code 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation Senior Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-17540-14-49**  
 Amount of Each Receipt this Period  
 50.00

**B. Viktoriya Torchinsky-Field**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City Philadelphia State PA Zip Code 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation Senior Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-17451-14-47**  
 Amount of Each Receipt this Period  
 50.00

**C. Rachel M. Tressy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Underwriting Segment Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-8257-14-49**  
 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 159 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Rachel M. Tressy**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

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

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 620.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-8211-14-47**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 901 E Cary St

City State Zip Code  
 Richmond VA 23219-4063

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Segment Lead

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-724-14-49**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**C. Michael W. Triplett**

Mailing Address 901 E Cary St

City State Zip Code  
 Richmond VA 23219-4063

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Segment Lead

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-718-14-47**

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: (check only one)	PAGE 160 OF 175
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

**A. James C. Tsokalas**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Architecture Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-18713-14-49**

Amount of Each Receipt this Period  
 10.00

**B. James C. Tsokalas**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Architecture Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-18616-14-47**

Amount of Each Receipt this Period  
 10.00

**C. Amy J. Turkington**  
Full Name (Last, First, Middle Initial)

Mailing Address 38901 Detroit Rd

City Avon State OH Zip Code 44011-2160

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Business Comm Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-3928-14-49**

Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<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 161 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Amy J. Turkington**

Mailing Address 38901 Detroit Rd

City Avon State OH Zip Code 44011-2160

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Business Comm Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
**12 / 20 / 2012**  
**Transaction ID : 20121218-3907-14-47**

Amount of Each Receipt this Period  
**10.00**

Full Name (Last, First, Middle Initial)  
**B. Laurinda M. Turnage**

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix State AZ Zip Code 85085-8200

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 ▼ **500.00**

Date of Receipt  
**12 / 06 / 2012**  
**Transaction ID : 20121207-10503-14-49**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. Laurinda M. Turnage**

Mailing Address 25500 N Norterra Dr Bldg B

City Phoenix State AZ Zip Code 85085-8200

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 ▼ **500.00**

Date of Receipt  
**12 / 20 / 2012**  
**Transaction ID : 20121218-10446-14-47**

Amount of Each Receipt this Period  
**50.00**

**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: (check only one)	PAGE 162 OF 175
	<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. Mario N. Vangeli**  
Full Name (Last, First, Middle Initial)

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Provider Contracting Sr Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-1879-14-47**

Amount of Each Receipt this Period  
8.00

**B. Julie A. Vayer**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna BEHAVIORAL HEALTH, INC. Occupation VP Total Health & Network Oper

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.20

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-8187-14-47**

Amount of Each Receipt this Period  
7.70

**C. Katharine L. Wade**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Public Policy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2935.00

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-722-14-49**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.70

**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 163 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Katharine L. Wade**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. VP Public Policy

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2935.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-716-14-47**

Amount of Each Receipt this Period  
 125.00

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Assoc Chief Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-9017-14-49**

Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**C. Michael T. Wade**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Assoc Chief Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-8968-14-47**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00

**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 164 OF 175
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Brian Wallach</b>		Date of Receipt
Mailing Address 2700 Post Oak Blvd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City State Zip Code Houston TX 77056-5784		<b>Transaction ID : 20121207-7352-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="29.93"/>
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Sr Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="778.18"/>	

Full Name (Last, First, Middle Initial) <b>B. Brian Wallach</b>		Date of Receipt
Mailing Address 2700 Post Oak Blvd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Houston TX 77056-5784		<b>Transaction ID : 20121218-7310-14-47</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="29.93"/>
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Sr Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="778.18"/>	

Full Name (Last, First, Middle Initial) <b>C. Patricia J. Walsh</b>		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City State Zip Code Hartford CT 06152-0001		<b>Transaction ID : 20121207-22229-14-49</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Cigna Corp.	Occupation VP Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2600.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="159.86"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 165 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Patricia J. Walsh**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. VP Deputy General Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-22075-14-47**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Provider Contracting Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 262.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-8725-14-49**

Amount of Each Receipt this Period  
 10.10

Full Name (Last, First, Middle Initial)  
**C. Joseph Wankerl**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Provider Contracting Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 262.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-8678-14-47**

Amount of Each Receipt this Period  
 10.10

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.20

**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 166 OF 175
	<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. Scott D. Watson**  
Full Name (Last, First, Middle Initial)

Mailing Address 231 S Bemiston Ave

City Clayton State MO Zip Code 63105-1914

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **741.71**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-4509-14-49**

Amount of Each Receipt this Period  
**16.46**

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

Mailing Address 231 S Bemiston Ave

City Clayton State MO Zip Code 63105-1914

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **741.71**

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : 20121218-4481-14-47**

Amount of Each Receipt this Period  
**16.46**

**C. Christopher J. Whelan**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Financial Analysis Sr Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt  
12 / 06 / 2012  
**Transaction ID : 20121207-11059-14-49**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **52.92**

**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 167 OF 175  
(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. Christopher J. Whelan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 Cottage Grove Rd  
City Hartford State CT Zip Code 06152-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Financial Analysis Sr Dir  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 12 / 20 / 2012  
Transaction ID : 20121218-11000-14-47  
Amount of Each Receipt this Period 200.00

**B. Deborah B. Wiacek**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 Cottage Grove Rd  
City Hartford State CT Zip Code 06152-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Alt Inv Sr Managing Dir  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00  
Date of Receipt 12 / 06 / 2012  
Transaction ID : 20121207-708-14-49  
Amount of Each Receipt this Period 10.00

**C. Deborah B. Wiacek**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 Cottage Grove Rd  
City Hartford State CT Zip Code 06152-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Alt Inv Sr Managing Dir  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00  
Date of Receipt 12 / 20 / 2012  
Transaction ID : 20121218-702-14-47  
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 168 OF 175  
(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. Lance Wilkes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Financial Strategy Sr Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-8216-14-49**  
 Amount of Each Receipt this Period  
 20.00

**B. Lance Wilkes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Financial Strategy Sr Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-8170-14-47**  
 Amount of Each Receipt this Period  
 20.00

**C. Derek C. Wilson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. Project Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-14642-14-47**  
 Amount of Each Receipt this Period  
 8.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 48.00  
**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 169 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

**A. Eric Witherspoon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 401 Chestnut St  
City Chattanooga State TN Zip Code 37402-4924  
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 ▼ 390.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2012  
**Transaction ID : 20121207-5196-14-49**  
Amount of Each Receipt this Period  
15.00

**B. Eric Witherspoon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 401 Chestnut St  
City Chattanooga State TN Zip Code 37402-4924  
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 ▼ 390.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2012  
**Transaction ID : 20121218-5167-14-47**  
Amount of Each Receipt this Period  
15.00

**C. Martha M. Wood**  
Full Name (Last, First, Middle Initial)  
Mailing Address 300 Bellevue Pkwy Ste 101  
City Wilmington State DE Zip Code 19809-3704  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Business Project Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2012  
**Transaction ID : 20121207-2464-14-49**  
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: (check only one)	PAGE 170 OF 175
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Martha M. Wood</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-2447-14-47</b>
Mailing Address 300 Bellevue Pkwy Ste 101		Amount of Each Receipt this Period 10.00
City Wilmington	State DE	Zip Code 19809-3704
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 ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Jules Paul Yancey</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2012 <b>Transaction ID : 20121218-2906-14-47</b>
Mailing Address 2000 Park Lane Dr Ste 100		Amount of Each Receipt this Period 7.70
City Pittsburgh	State PA	Zip Code 15275-1114
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Sales New Bus Developmt Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.20	

Full Name (Last, First, Middle Initial) <b>C. Bu Yang</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2012 <b>Transaction ID : 20121207-7953-14-49</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 21.15
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation IT Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 549.90	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	38.85
<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 171 OF 175  
(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**

Full Name (Last, First, Middle Initial)  
**A. Bu Yang**  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO IT Senior Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 549.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-7908-14-47**  
 Amount of Each Receipt this Period  
 21.15

Full Name (Last, First, Middle Initial)  
**B. Robert J. Youell**  
 Mailing Address 2 College Park Dr  
 City State Zip Code  
 Hooksett NH 03106-1636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Financial Analysis Sr Spec  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 234.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-7468-14-49**  
 Amount of Each Receipt this Period  
 9.00

Full Name (Last, First, Middle Initial)  
**C. Robert J. Youell**  
 Mailing Address 2 College Park Dr  
 City State Zip Code  
 Hooksett NH 03106-1636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Financial Analysis Sr Spec  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 234.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-7424-14-47**  
 Amount of Each Receipt this Period  
 9.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 39.15  
**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: (check only one)	PAGE 172 OF 175
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

**A. John Young**  
Full Name (Last, First, Middle Initial)

Mailing Address 11095 Viking Dr

City Eden Prairie State MN Zip Code 55344-7223

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

Name of Employer Cigna Corp. Occupation Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-12611-14-49**

Amount of Each Receipt this Period  
**20.00**

**B. John Young**  
Full Name (Last, First, Middle Initial)

Mailing Address 11095 Viking Dr

City Eden Prairie State MN Zip Code 55344-7223

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

Name of Employer Cigna Corp. Occupation Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : 20121218-12543-14-47**

Amount of Each Receipt this Period  
**20.00**

**C. Michael J. Young**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : 20121207-2978-14-49**

Amount of Each Receipt this Period  
**10.00**

**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 173 OF 175
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

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

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2012

**Transaction ID : 20121218-2960-14-47**

Amount of Each Receipt this Period  
10.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16053.62

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

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

FOR LINE NUMBER: PAGE 174 OF 175  
(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. HealthSpring, Inc. Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9009 Carothers Parkway  
 Suite 501  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 87899.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2012  
**Transaction ID : C3345933ED26690C8AF**  
 Amount of Each Receipt this Period  
 87899.48  
 Transfer from Affiliated Committee

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	87899.48
<b>TOTAL</b> This Period (last page this line number only).....▶	87899.48

# 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

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NAME OF COMMITTEE (In Full)  
**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Bill Haslam for Governor

Mailing Address 1910 21st Ave South

City Nashville State TN Zip Code 37212

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			20			2012					

Transaction ID : C831F66F61CCB09A01D

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

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

5000.00
---------

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

5000.00
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