

**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="2014"/>	<input type="text" value="237988.38"/>	<input type="text" value="237988.38"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="289237.96"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="32277.82"/>	<input type="text" value="336002.40"/>
(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="321515.78"/>	<input type="text" value="573990.78"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="69400.00"/>	<input type="text" value="321875.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="252115.78"/>	<input type="text" value="252115.78"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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).....	24900.18	211184.20
(ii) Unitemized	7377.64	122693.20
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	32277.82	333877.40
(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)	32277.82	333877.40
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2125.00
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))..... ▶	32277.82	336002.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	32277.82	336002.40

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	1225.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	1225.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55500.00	253000.00
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	13900.00	67650.00
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)) ..	69400.00	321875.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	69400.00	321875.00

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)	32277.82	333877.40
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32277.82	333877.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	1225.00
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	1225.00

**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 173
	<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. Anthony Abate		Date of Receipt 09 / 11 / 2014 Transaction ID : 20140908-17745-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 155.00
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation VP Supply Chain Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3100.00	

Full Name (Last, First, Middle Initial) B. Anthony Abate		Date of Receipt 09 / 25 / 2014 Transaction ID : 20140922-17683-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 155.00
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation VP Supply Chain Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3100.00	

Full Name (Last, First, Middle Initial) C. Linda A. Adamsons		Date of Receipt 09 / 11 / 2014 Transaction ID : 20140908-1020-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 15.00
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 Accounting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 7 OF 173
	<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. Linda A. Adamsons
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 Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-1018-20-23

Amount of Each Receipt this Period 15.00

B. Melissa Ahmann-Tucker
Full Name (Last, First, Middle Initial)

Mailing Address 9009 Carothers Pkwy

City Franklin State TN Zip Code 37067-1704

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

Name of Employer Cigna Corp. Occupation Actuarial Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1275.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-31164-20-23

Amount of Each Receipt this Period 75.00

C. Marc M. Alcedo
Full Name (Last, First, Middle Initial)

Mailing Address 1729 Canonero Dr

City Austin State TX Zip Code 78746-2114

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

Name of Employer Cigna Corp. Occupation Government Affairs Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-21964-20-23

Amount of Each Receipt this Period 25.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 173
	<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. Marc M. Alcedo
Full Name (Last, First, Middle Initial)

Mailing Address 1729 Canonero Dr

City Austin State TX Zip Code 78746-2114

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

Name of Employer Cigna Corp. Occupation Government Affairs Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-21879-20-23

Amount of Each Receipt this Period
25.00

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

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 ▼ **538.60**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : 20140908-11116-20-23

Amount of Each Receipt this Period
26.93

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

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 ▼ **538.60**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-11091-20-23

Amount of Each Receipt this Period
26.93

SUBTOTAL of Receipts This Page (optional).....▶	78.86
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 173
(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 J. Allen

Mailing Address 500 Great Circle Rd

City Nashville State TN Zip Code 37228-1309

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 ▼ 1000.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-30419-20-23

Amount of Each Receipt this Period
 50.00

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

Mailing Address 500 Great Circle Rd

City Nashville State TN Zip Code 37228-1309

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 ▼ 1000.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-30474-20-23

Amount of Each Receipt this Period
 50.00

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

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 Segment Marketing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-3566-20-23

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 10 OF 173
	<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) A. William R. Antonello			Date of Receipt
Mailing Address 1571 Sawgrass Corporate Pkwy			M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014
City Sunrise	State FL	Zip Code 33323-2862	Transaction ID : 20140922-3555-20-23
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 25.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Segment Marketing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Raegan M. Armata			Date of Receipt
Mailing Address 900 Cottage Grove Rd			M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2014
City Hartford	State CT	Zip Code 06152-0001	Transaction ID : 20140908-207-20-23
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 25.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Marketing Product Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Raegan M. Armata			Date of Receipt
Mailing Address 900 Cottage Grove Rd			M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014
City Hartford	State CT	Zip Code 06152-0001	Transaction ID : 20140922-207-20-23
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 25.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Marketing Product Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

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 11 OF 173
	<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. Ann H. Asbaty
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 E 45th St
 City New York State NY Zip Code 10017-3144
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-313-20-23
 Amount of Each Receipt this Period
 50.00

B. Ann H. Asbaty
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 E 45th St
 City New York State NY Zip Code 10017-3144
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-313-20-23
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1676-20-23
 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 12 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

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 VP Product Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-1674-20-23

Amount of Each Receipt this Period
50.00

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

Mailing Address 394 W Remington Dr

City State Zip Code
Chandler AZ 85286-7642

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
906.81

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-5002-20-23

Amount of Each Receipt this Period
53.31

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

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. Corporate Services Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-20390-20-23

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 118.31

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Sanjiv Awasthi			Date of Receipt
Mailing Address 900 Cottage Grove Rd			<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 20140922-20316-20-23
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="15.00"/>
Name of Employer	Occupation		
Cigna Corp.	Corporate Services Director		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Lisa R. Bacus			Date of Receipt
Mailing Address 900 Cottage Grove Rd			<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 20140908-24466-20-23
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="154.00"/>
Name of Employer	Occupation		
Cigna Corp.	EVP Chief Marketing Officer		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3080.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Lisa R. Bacus			Date of Receipt
Mailing Address 900 Cottage Grove Rd			<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 20140922-24358-20-23
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="154.00"/>
Name of Employer	Occupation		
Cigna Corp.	EVP Chief Marketing Officer		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3080.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="323.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Gary A. Bailey		Date of Receipt
Mailing Address 3601 Odonnell St		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Baltimore State MD Zip Code 21224-5238		Transaction ID : 20140908-31283-20-23
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 Government Affairs Director		<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="2000.00"/>

Full Name (Last, First, Middle Initial) B. Gary A. Bailey		Date of Receipt
Mailing Address 3601 Odonnell St		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Baltimore State MD Zip Code 21224-5238		Transaction ID : 20140922-31330-20-23
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 Government Affairs Director		<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="2000.00"/>

Full Name (Last, First, Middle Initial) C. Mark Bailey		Date of Receipt
Mailing Address 1640 Dallas Pkwy		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Plano State TX Zip Code 75093-4515		Transaction ID : 20140908-10996-20-23
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 Sales Director-Direct Sales		<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="1000.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Mark Bailey		Date of Receipt
Mailing Address 1640 Dallas Pkwy		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Plano	TX	75093-4515
FEC ID number of contributing federal political committee.		Transaction ID : 20140922-10971-20-23
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna Corp.		<input type="text" value="50.00"/>
Occupation Sales Director-Direct Sales		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Amie L. Benedict		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hartford	CT	06152-0001
FEC ID number of contributing federal political committee.		Transaction ID : 20140908-6879-20-23
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna Corporation		<input type="text" value="20.00"/>
Occupation General Manager		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Amie L. Benedict		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hartford	CT	06152-0001
FEC ID number of contributing federal political committee.		Transaction ID : 20140922-6861-20-23
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna Corporation		<input type="text" value="20.00"/>
Occupation General Manager		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 16 OF 173
(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

Full Name (Last, First, Middle Initial)
A. Amy R. Bennett

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 Information Protection Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-1536-20-23

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Amy R. Bennett

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 Information Protection Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-1535-20-23

Amount of Each Receipt this Period
50.00

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

Mailing Address 499 Washington Blvd

City State Zip Code
Jersey City NJ 07310-1995

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-2039-20-23

Amount of Each Receipt this Period
50.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 173
	(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. 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-2036-20-23

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 ▼ 226.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-6316-20-23

Amount of Each Receipt this Period
 3.37

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 ▼ 226.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-6302-20-23

Amount of Each Receipt this Period
 14.74

SUBTOTAL of Receipts This Page (optional)..... ▶ 68.11

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 18 OF 173
	(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. Kim Bimestefer
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 CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-7884-20-23

Amount of Each Receipt this Period 90.00

B. Kim Bimestefer
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 CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-7865-20-23

Amount of Each Receipt this Period 90.00

c. John J. Bogan
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 Chief Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-22323-20-23

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 173
	<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. John J. Bogan
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 Chief Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-22234-20-23

Amount of Each Receipt this Period
50.00

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 ▼
385.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-1753-20-23

Amount of Each Receipt this Period
19.25

C. 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 ▼
385.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-1751-20-23

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: PAGE 20 OF 173
(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. Mark L. Boxer

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 ▼
 3840.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-9079-20-23

Amount of Each Receipt this Period
 192.00

Full Name (Last, First, Middle Initial)
B. Mark L. Boxer

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 ▼
 3840.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-9058-20-23

Amount of Each Receipt this Period
 192.00

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

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. SVP Service Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3840.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-12674-20-23

Amount of Each Receipt this Period
 192.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 576.00

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

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

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

FOR LINE NUMBER: PAGE 21 OF 173
(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. Brett C. Browchuk
 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. SVP Service Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-12640-20-23
 Amount of Each Receipt this Period
 192.00

Full Name (Last, First, Middle Initial)
B. William Brown
 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 General Manager
 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
 09 / 11 / 2014
Transaction ID : 20140908-7964-20-23
 Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. William Brown
 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 General Manager
 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
 09 / 25 / 2014
Transaction ID : 20140922-7945-20-23
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 242.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 173
	<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. Kelly K. Brundin
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 VP Financial Plng & Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-2930-20-23

Amount of Each Receipt this Period
50.00

B. Kelly K. Brundin
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 VP Financial Plng & Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-2923-20-23

Amount of Each Receipt this Period
50.00

C. Zigmund R. Brzezinski
Full Name (Last, First, Middle Initial)

Mailing Address 801 Ocean Rd

City Spring Lake State NJ Zip Code 07762-1931

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 ▼ 339.01

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-2495-20-23

Amount of Each Receipt this Period
16.98

SUBTOTAL of Receipts This Page (optional).....▶ 116.98

TOTAL This Period (last page this line 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 173
	<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

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. Zigmund R. Brzezinski

Mailing Address 801 Ocean Rd

City Spring Lake State NJ Zip Code 07762-1931

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 ▼ **339.01**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-2489-20-23

Amount of Each Receipt this Period
17.04

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

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 Manager Account Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **683.23**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : 20140908-4189-20-23

Amount of Each Receipt this Period
12.04

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

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 Manager Account Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **683.23**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-4177-20-23

Amount of Each Receipt this Period
82.41

SUBTOTAL of Receipts This Page (optional)..... ▶ **111.49**

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

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

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

FOR LINE NUMBER: PAGE 24 OF 173
(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. 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 ▼
 1000.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-12475-20-23

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 ▼
 1000.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-12444-20-23

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Glenn T. Butkus

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 Senior Sales Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-339-20-23

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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

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

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

FOR LINE NUMBER: PAGE 25 OF 173
(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. Glenn T. Butkus

Mailing Address 2223 Washington St

City State Zip Code
 Newton MA 02462-1417

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

Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO Senior Sales Representative

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
 09 / 25 / 2014
Transaction ID : 20140922-339-20-23

Amount of Each Receipt this Period
 20.00

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

Mailing Address 2223 Washington St

City State Zip Code
 Newton MA 02462-1417

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

Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-8692-20-23

Amount of Each Receipt this Period
 25.00

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

Mailing Address 2223 Washington St

City State Zip Code
 Newton MA 02462-1417

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

Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-8671-20-23

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 26 OF 173
	<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. Vanda Campbell
Full Name (Last, First, Middle Initial)
Mailing Address 500 Great Circle Rd
City Nashville State TN Zip Code 37228-1309
FEC ID number of contributing federal political committee. **C**
Name of Employer Cigna Corp. Occupation Operations Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-30466-20-23
Amount of Each Receipt this Period 50.00

B. Vanda Campbell
Full Name (Last, First, Middle Initial)
Mailing Address 500 Great Circle Rd
City Nashville State TN Zip Code 37228-1309
FEC ID number of contributing federal political committee. **C**
Name of Employer Cigna Corp. Occupation Operations Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-30520-20-23
Amount of Each Receipt this Period 50.00

C. Jill R. Canino
Full Name (Last, First, Middle Initial)
Mailing Address 601 Pennsylvania Ave NW
City Washington State DC Zip Code 20004-2601
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 09 / 11 / 2014
Transaction ID : 20140908-28344-20-23
Amount of Each Receipt this Period 100.00

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: (check only one)	PAGE 27 OF 173
	<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. Jill R. Canino
Full Name (Last, First, Middle Initial)

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

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
M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : 20140922-28202-20-23

Amount of Each Receipt this Period
100.00

B. Karen M. Cantelmo
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 Provider Contracting 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
09 / 11 / 2014

Transaction ID : 20140908-4227-20-23

Amount of Each Receipt this Period
15.00

C. Karen M. Cantelmo
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 Provider Contracting 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
09 / 25 / 2014

Transaction ID : 20140922-4215-20-23

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **130.00**

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

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

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

FOR LINE NUMBER: PAGE 28 OF 173
(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 S. Cantrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1640 Dallas Pkwy
 City State Zip Code
 Plano TX 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 ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-5217-20-23
 Amount of Each Receipt this Period
 15.00

B. John S. Cantrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1640 Dallas Pkwy
 City State Zip Code
 Plano TX 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 ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-5203-20-23
 Amount of Each Receipt this Period
 15.00

C. Wendy L. Carberg
 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 Operations Senior Director
 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
 09 / 11 / 2014
Transaction ID : 20140908-891-20-23
 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 29 OF 173
(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. Wendy L. Carberg

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-889-20-23

Amount of Each Receipt this Period
 20.00

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

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 Real Estate Sr Managing Dir

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
 09 / 11 / 2014
Transaction ID : 20140908-683-20-23

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 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 Real Estate Sr Managing Dir

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
 09 / 25 / 2014
Transaction ID : 20140922-681-20-23

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 30 OF 173
	<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. Steven Caron
 Full Name (Last, First, Middle Initial)
 Mailing Address 237 Tall Pines Dr
 City Sewell State NJ Zip Code 08080-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Architecture Director
 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
 09 / 11 / 2014
Transaction ID : 20140908-2034-20-23
 Amount of Each Receipt this Period
 30.00

B. Steven Caron
 Full Name (Last, First, Middle Initial)
 Mailing Address 237 Tall Pines Dr
 City Sewell State NJ Zip Code 08080-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Architecture Director
 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
 09 / 25 / 2014
Transaction ID : 20140922-2031-20-23
 Amount of Each Receipt this Period
 30.00

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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-5523-20-23
 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: PAGE 31 OF 173
(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. 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 ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-5510-20-23

Amount of Each Receipt this Period
50.00

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

Mailing Address 3650 Marigold St

City Seal Beach State CA Zip Code 90740-3115

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : 20140908-15453-20-23

Amount of Each Receipt this Period
12.00

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

Mailing Address 3650 Marigold St

City Seal Beach State CA Zip Code 90740-3115

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-15403-20-23

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **74.00**

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 32 OF 173
	<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. Frank H. Cisz
Full Name (Last, First, Middle Initial)

Mailing Address 9 Griffin Rd. North, Data Center

City Windsor State CT Zip Code 06095

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

Name of Employer Cigna Corp. Occupation IT Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 11 / 2014**

Transaction ID : 20140908-13318-20-23

Amount of Each Receipt this Period **25.00**

B. Frank H. Cisz
Full Name (Last, First, Middle Initial)

Mailing Address 9 Griffin Rd. North, Data Center

City Windsor State CT Zip Code 06095

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

Name of Employer Cigna Corp. Occupation IT Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 25 / 2014**

Transaction ID : 20140922-13278-20-23

Amount of Each Receipt this Period **25.00**

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 ▼ **1800.00**

Date of Receipt **09 / 11 / 2014**

Transaction ID : 20140908-366-20-23

Amount of Each Receipt this Period **90.00**

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 33 OF 173
	<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. 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 ▼ 1800.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-366-20-23
 Amount of Each Receipt this Period 90.00

B. Debra P. Cody
 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 Information Protection Sr Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-18312-20-23
 Amount of Each Receipt this Period 50.00

c. Debra P. Cody
 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 Information Protection Sr Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-18249-20-23
 Amount of Each Receipt this Period 50.00

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 34 OF 173
(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. 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 Operations Director
 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
 09 / 11 / 2014
Transaction ID : 20140908-10465-20-23
 Amount of Each Receipt this Period
 20.00

B. 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 Operations Director
 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
 09 / 25 / 2014
Transaction ID : 20140922-10439-20-23
 Amount of Each Receipt this Period
 20.00

C. Timothy K. Conners
 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 IT Senior Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-20197-20-23
 Amount of Each Receipt this Period
 50.00

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 35 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Timothy K. Conners		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-20125-20-23
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 50.00
City Philadelphia	State PA	Zip Code 19192-0002
FEC ID number of contributing federal political committee.	C	
Name of Employer Cigna Corp.	Occupation IT Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Michael Conrad		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-2112-20-23
Mailing Address 400 N Brand Blvd		Amount of Each Receipt this Period 9.26
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1232.62	

Full Name (Last, First, Middle Initial) C. Michael Conrad		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-2109-20-23
Mailing Address 400 N Brand Blvd		Amount of Each Receipt this Period 9.32
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1232.62	

SUBTOTAL of Receipts This Page (optional).....▶	68.58
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. Lorraine M. Consiglio		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2014 Transaction ID : 20140908-7191-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 12.00
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 Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Lorraine M. Consiglio		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 Transaction ID : 20140922-7172-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 12.00
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 Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Eric P. Consolazio		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2014 Transaction ID : 20140908-1690-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 100.00
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 VP Information Technology
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional).....▶	124.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 OF 173
	(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. Eric P. Consolazio
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 Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-1688-20-23

Amount of Each Receipt this Period
 100.00

B. Joshua Cook
Full Name (Last, First, Middle Initial)

Mailing Address 105 Decker Ct

City Irving State TX Zip Code 75062-2767

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

Name of Employer Cigna Corp. Occupation HS Network Opns Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-32204-20-23

Amount of Each Receipt this Period
 50.00

C. Joshua Cook
Full Name (Last, First, Middle Initial)

Mailing Address 105 Decker Ct

City Irving State TX Zip Code 75062-2767

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

Name of Employer Cigna Corp. Occupation HS Network Opns Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-32244-20-23

Amount of Each Receipt this Period
 50.00

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: (check only one)	PAGE 38 OF 173
	<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. 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 ▼ 3840.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-438-20-23
 Amount of Each Receipt this Period 192.00

B. 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 ▼ 3840.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-438-20-23
 Amount of Each Receipt this Period 192.00

C. Daniel J. Cozzo
 Full Name (Last, First, Middle Initial)
 Mailing Address 31792 Via Coyote
 City Coto De Caza State CA Zip Code 92679-4105
 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 ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-9816-20-23
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 434.00
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 39 OF 173
	<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. Daniel J. Cozzo
Full Name (Last, First, Middle Initial)

Mailing Address 31792 Via Coyote

City	State	Zip Code
Coto De Caza	CA	92679-4105

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 ▼ **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : 20140922-9791-20-23

Amount of Each Receipt this Period
50.00

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

Mailing Address 216 B Ave

City	State	Zip Code
Coronado	CA	92118-1955

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

Name of Employer	Occupation
Cigna Corp.	Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 11 / 2014

Transaction ID : 20140908-12273-20-23

Amount of Each Receipt this Period
19.25

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

Mailing Address 216 B Ave

City	State	Zip Code
Coronado	CA	92118-1955

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

Name of Employer	Occupation
Cigna Corp.	Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : 20140922-12241-20-23

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: PAGE 40 OF 173
(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. Rebecca A. Croes
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 North Loop W
 City Houston State TX Zip Code 77092-8841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Marketing Product Sr Director
 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
 09 / 11 / 2014
Transaction ID : 20140908-31417-20-23
 Amount of Each Receipt this Period
 75.00

B. Rebecca A. Croes
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 North Loop W
 City Houston State TX Zip Code 77092-8841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Marketing Product Sr Director
 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
 09 / 25 / 2014
Transaction ID : 20140922-31462-20-23
 Amount of Each Receipt this Period
 75.00

C. 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 ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-7764-20-23
 Amount of Each Receipt this Period
 100.00

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:	PAGE 41 OF 173
	(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. 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 ▼ 2000.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-7745-20-23

Amount of Each Receipt this Period
100.00

B. Brian Cuddeback
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 Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-11017-20-23

Amount of Each Receipt this Period
20.00

C. Brian Cuddeback
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 Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-10992-20-23

Amount of Each Receipt this Period
20.00

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: PAGE 42 OF 173
(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. 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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-9456-20-23

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. 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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-9432-20-23

Amount of Each Receipt this Period
 20.00

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

Mailing Address 300 Bellevue Pkwy
 Ste 101

City State Zip Code
 Wilmington DE 19809-3704

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

Name of Employer Occupation
 LIFE INS. CO. OF NORTH AMERICA Financial Analysis Sr Dir

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
 09 / 11 / 2014
Transaction ID : 20140908-9212-20-23

Amount of Each Receipt this Period
 25.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 173
	<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. Gregory J. Czar
Full Name (Last, First, Middle Initial)

Mailing Address 300 Bellevue Pkwy
Ste 101

City State Zip Code
Wilmington DE 19809-3704

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

Name of Employer Occupation
LIFE INS. CO. OF NORTH AMERICA Financial Analysis Sr Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-9192-20-23

Amount of Each Receipt this Period
25.00

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

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 Sr Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-2299-20-23

Amount of Each Receipt this Period
50.00

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

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 Sr Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-2295-20-23

Amount of Each Receipt this Period
50.00

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 44 OF 173
(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. Robert L. Dawson

Mailing Address 9009 Carothers Pkwy

City State Zip Code
Franklin TN 37067-1704

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

Name of Employer Occupation
Cigna Corp. RVP Segment Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-31670-20-23

Amount of Each Receipt this Period
170.00

Full Name (Last, First, Middle Initial)
B. Robert L. Dawson

Mailing Address 9009 Carothers Pkwy

City State Zip Code
Franklin TN 37067-1704

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

Name of Employer Occupation
Cigna Corp. RVP Segment Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-31713-20-23

Amount of Each Receipt this Period
170.00

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

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. VP Chief Counsel

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
 09 / 11 / 2014
Transaction ID : 20140908-223-20-23

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 365.00

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 45 OF 173
	<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. Johannes M. De Jong
 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 Chief Counsel
 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
 09 / 25 / 2014
Transaction ID : 20140922-223-20-23
 Amount of Each Receipt this Period
25.00

B. 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 **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1589-20-23
 Amount of Each Receipt this Period
100.00

c. 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 **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-1588-20-23
 Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 46 OF 173
(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. John R. DeFeo

Mailing Address 1721 Chantilly Ln

City State Zip Code
 Chester Springs PA 19425-1734

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

Name of Employer Occupation
 Cigna Corp. VP Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-18691-20-23

Amount of Each Receipt this Period
 135.00

Full Name (Last, First, Middle Initial)
B. John R. DeFeo

Mailing Address 1721 Chantilly Ln

City State Zip Code
 Chester Springs PA 19425-1734

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

Name of Employer Occupation
 Cigna Corp. VP Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-18628-20-23

Amount of Each Receipt this Period
 135.00

Full Name (Last, First, Middle Initial)
C. Elizabeth DeForest

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 Audit 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
 09 / 11 / 2014
Transaction ID : 20140908-9083-20-23

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00

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

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

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

FOR LINE NUMBER: PAGE 47 OF 173
(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. Elizabeth DeForest

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 Audit Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-9062-20-23

Amount of Each Receipt this Period
 15.00

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

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. VP Investor Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-2378-20-23

Amount of Each Receipt this Period
 20.00

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

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. VP Investor Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-2373-20-23

Amount of Each Receipt this Period
 20.00

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: (check only one)	PAGE 48 OF 173
	<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. Brendan J. Devine
Full Name (Last, First, Middle Initial)

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

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 ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-25884-20-23

Amount of Each Receipt this Period 50.00

B. Brendan J. Devine
Full Name (Last, First, Middle Initial)

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

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 ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-25766-20-23

Amount of Each Receipt this Period 50.00

C. Constance J. DiManno
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 Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-9583-20-23

Amount of Each Receipt this Period 50.00

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

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

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

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

FOR LINE NUMBER: PAGE 49 OF 173
(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. Constance J. DiManno

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 Project Management Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-9558-20-23

Amount of Each Receipt this Period
 50.00

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

Mailing Address 5310 E High St

City State Zip Code
 Phoenix AZ 85054-5469

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 622.28

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-27-20-23

Amount of Each Receipt this Period
 40.80

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

Mailing Address 5310 E High St

City State Zip Code
 Phoenix AZ 85054-5469

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 622.28

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-27-20-23

Amount of Each Receipt this Period
 7.01

SUBTOTAL of Receipts This Page (optional)..... ▶ 97.81

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 50 OF 173
(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. Eugene H. Dours

Mailing Address 1640 Dallas Pkwy

City State Zip Code
 Plano TX 75093-4515

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

Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 370.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-5144-20-23

Amount of Each Receipt this Period
 18.50

Full Name (Last, First, Middle Initial)
B. Eugene H. Dours

Mailing Address 1640 Dallas Pkwy

City State Zip Code
 Plano TX 75093-4515

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

Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 370.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-5130-20-23

Amount of Each Receipt this Period
 18.50

Full Name (Last, First, Middle Initial)
C. Michael D. Elmore

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. IT Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-19232-20-23

Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 112.00

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 51 OF 173
	<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 D. Elmore
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 IT Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-19166-20-23

Amount of Each Receipt this Period 75.00

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

Mailing Address 140 E 45th St

City New York State NY Zip Code 10017-3144

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

Name of Employer Cigna Corporation Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-13893-20-23

Amount of Each Receipt this Period 50.00

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

Mailing Address 140 E 45th St

City New York State NY Zip Code 10017-3144

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

Name of Employer Cigna Corporation Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-13848-20-23

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: PAGE 52 OF 173
(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. Beverly J. Everett

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-107-20-23

Amount of Each Receipt this Period
 20.00

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

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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-107-20-23

Amount of Each Receipt this Period
 20.00

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

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. Account Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-11209-20-23

Amount of Each Receipt this Period
 19.25

SUBTOTAL of Receipts This Page (optional)..... ▶ 59.25

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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 ▼ **385.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-11184-20-23

Amount of Each Receipt this Period
19.25

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

Mailing Address 15 Dilaj Dr

City Columbia State CT Zip Code 06237-1048

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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : 20140908-1807-20-23

Amount of Each Receipt this Period
20.00

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

Mailing Address 15 Dilaj Dr

City Columbia State CT Zip Code 06237-1048

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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-1805-20-23

Amount of Each Receipt this Period
20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. Scott M. Filiault		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-232-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 25.00
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 Informatics Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Scott M. Filiault		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-232-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 25.00
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 Informatics Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. David H. Finley		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-18513-20-23
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 Cigna Corp.	Occupation Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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 55 OF 173
	<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. David H. Finley		Date of Receipt 09 / 25 / 2014 Transaction ID : 20140922-18450-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 50.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	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. Mary Fischer-McKee		Date of Receipt 09 / 11 / 2014 Transaction ID : 20140908-12149-20-23
Mailing Address 25600 N Norterra Dr Bldg A		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	
Zip Code 85085-8201		Aggregate Year-to-Date ▼ 300.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corporation	Occupation Operations Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mary Fischer-McKee		Date of Receipt 09 / 25 / 2014 Transaction ID : 20140922-12118-20-23
Mailing Address 25600 N Norterra Dr Bldg A		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	
Zip Code 85085-8201		Aggregate Year-to-Date ▼ 300.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corporation	Occupation Operations Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 56 OF 173
(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. 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1586-20-23
 Amount of Each Receipt this Period
 50.00

B. 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-1585-20-23
 Amount of Each Receipt this Period
 50.00

C. Brett L. Fleisher
 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 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
 09 / 11 / 2014
Transaction ID : 20140908-9267-20-23
 Amount of Each Receipt this Period
 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 173
	<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. Mark Foulke
Full Name (Last, First, Middle Initial)

Mailing Address 530 Great Circle Rd

City Nashville State TN Zip Code 37228-1309

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

Name of Employer Cigna Corp. Occupation HS Network Opns Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-31547-20-23

Amount of Each Receipt this Period 50.00

B. Mark Foulke
Full Name (Last, First, Middle Initial)

Mailing Address 530 Great Circle Rd

City Nashville State TN Zip Code 37228-1309

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

Name of Employer Cigna Corp. Occupation HS Network Opns Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-31590-20-23

Amount of Each Receipt this Period 50.00

C. Robert S. Fry
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 Director-Sales Mgt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-2678-20-23

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 58 OF 173
	<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. Robert S. Fry
 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 Director-Sales Mgt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-2672-20-23
 Amount of Each Receipt this Period
50.00

B. Peter R. Gardner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 North Loop W
 City Houston State TX Zip Code 77092-8841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Market Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-31363-20-23
 Amount of Each Receipt this Period
50.00

C. Peter R. Gardner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 North Loop W
 City Houston State TX Zip Code 77092-8841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Market Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-31409-20-23
 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 59 OF 173
	<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. 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 ▼ **385.00**

Date of Receipt **09 / 11 / 2014**

Transaction ID : 20140908-1920-20-23

Amount of Each Receipt this Period **19.25**

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 ▼ **385.00**

Date of Receipt **09 / 25 / 2014**

Transaction ID : 20140922-1918-20-23

Amount of Each Receipt this Period **19.25**

C. Willis H. Gee
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 ▼ **2000.00**

Date of Receipt **09 / 11 / 2014**

Transaction ID : 20140908-8779-20-23

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **138.50**

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 60 OF 173
	(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. Willis H. Gee
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 ▼ 2000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-8758-20-23

Amount of Each Receipt this Period 100.00

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 ▼ 511.32

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-3749-20-23

Amount of Each Receipt this Period 6.48

C. 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 ▼ 511.32

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-3738-20-23

Amount of Each Receipt this Period 17.92

SUBTOTAL of Receipts This Page (optional)..... ▶ 124.40

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 173
	<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. Jennifer R. Gilbert
Full Name (Last, First, Middle Initial)

Mailing Address 6401 Poplar Ave

City Memphis State TN Zip Code 38119-4823

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

Name of Employer Cigna Corp. Occupation HS Network Opns Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-32244-20-23

Amount of Each Receipt this Period 50.00

B. Jennifer R. Gilbert
Full Name (Last, First, Middle Initial)

Mailing Address 6401 Poplar Ave

City Memphis State TN Zip Code 38119-4823

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

Name of Employer Cigna Corp. Occupation HS Network Opns Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-32284-20-23

Amount of Each Receipt this Period 50.00

C. Debra L. Glover
Full Name (Last, First, Middle Initial)

Mailing Address 9009 Carothers Pkwy

City Franklin State TN Zip Code 37067-1704

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

Name of Employer Cigna Corp. Occupation App Development Sr Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-30507-20-23

Amount of Each Receipt this Period 50.00

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

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

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

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

FOR LINE NUMBER: PAGE 62 OF 173
(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. Debra L. Glover
 Full Name (Last, First, Middle Initial)
 Mailing Address 9009 Carothers Pkwy
 City State Zip Code
 Franklin TN 37067-1704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cigna Corp. App Development Sr Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-30561-20-23
 Amount of Each Receipt this Period
 50.00

B. John P. Godsill
 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 SVP Information Technology
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-8806-20-23
 Amount of Each Receipt this Period
 160.00

C. John P. Godsill
 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 SVP Information Technology
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-8785-20-23
 Amount of Each Receipt this Period
 160.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
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 63 OF 173
(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. Ronald J. Goglia

Mailing Address 300 Morrison Ave

City Easton State PA Zip Code 18042-1439

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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : 20140908-2109-20-23

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Ronald J. Goglia

Mailing Address 300 Morrison Ave

City Easton State PA Zip Code 18042-1439

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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-2106-20-23

Amount of Each Receipt this Period
20.00

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

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 Strat And Bus Develop Sr Dir

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
09 / 11 / 2014
Transaction ID : 20140908-1851-20-23

Amount of Each Receipt this Period
25.00

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

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

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

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

FOR LINE NUMBER: PAGE 64 OF 173
(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. Richard Gray

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 ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-1849-20-23

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Bruce M. Grimm

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 General Manager

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
 09 / 11 / 2014
Transaction ID : 20140908-6620-20-23

Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
C. Bruce M. Grimm

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 General Manager

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
 09 / 25 / 2014
Transaction ID : 20140922-6603-20-23

Amount of Each Receipt this Period
 15.00

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: (check only one)	PAGE 65 OF 173
	<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. Jeffrey C. Gross
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 Information Protection Manager

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
 09 / 11 / 2014
Transaction ID : 20140908-16581-20-23

Amount of Each Receipt this Period
24.00

B. Jeffrey C. Gross
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 Information Protection Manager

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
 09 / 25 / 2014
Transaction ID : 20140922-16523-20-23

Amount of Each Receipt this Period
24.00

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

Mailing Address 140 E 45th St

City New York State NY Zip Code 10017-3144

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

Name of Employer Cigna Corp. Occupation Multi-Segment Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3840.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-17535-20-23

Amount of Each Receipt this Period
192.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **240.00**

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 66 OF 173
(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. David D. Guilmette
 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. Multi-Segment Lead
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-17473-20-23
 Amount of Each Receipt this Period
 192.00

Full Name (Last, First, Middle Initial)
B. James E. Gulley
 Mailing Address 530 Great Circle Rd
 City State Zip Code
 Nashville TN 37228-1309
 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 ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-31164-20-23
 Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
c. James E. Gulley
 Mailing Address 530 Great Circle Rd
 City State Zip Code
 Nashville TN 37228-1309
 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 ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-31212-20-23
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 242.00
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 67 OF 173
	<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. Theresa A. Hall
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 Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-14496-20-23

Amount of Each Receipt this Period
 50.00

B. Theresa A. Hall
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 Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-14448-20-23

Amount of Each Receipt this Period
 50.00

C. 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-4854-20-23

Amount of Each Receipt this Period
 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Joseph L. Hannah		Date of Receipt
Mailing Address 901 E Cary St		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Richmond State VA Zip Code 23219-4063		Transaction ID : 20140922-4840-20-23
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="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. Tobin B. Hawkins		Date of Receipt
Mailing Address 2700 Post Oak Blvd		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Houston State TX Zip Code 77056-5784		Transaction ID : 20140908-5045-20-23
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="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) C. Tobin B. Hawkins		Date of Receipt
Mailing Address 2700 Post Oak Blvd		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Houston State TX Zip Code 77056-5784		Transaction ID : 20140922-5031-20-23
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="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

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

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

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

FOR LINE NUMBER: PAGE 69 OF 173
(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. Ben K. Haynes

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 ▼
 300.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-3484-20-23

Amount of Each Receipt this Period
 15.00

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

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 ▼
 300.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-3473-20-23

Amount of Each Receipt this Period
 15.00

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

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 VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-10736-20-23

Amount of Each Receipt this Period
 40.00

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 70 OF 173
	<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

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. Gregory T. Hicks
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 Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **09 / 25 / 2014**
Transaction ID : 20140922-10710-20-23

Amount of Each Receipt this Period **40.00**

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

Mailing Address 1 Cigna Dr

City Bourbonnais State IL Zip Code 60914-4475

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

Name of Employer Cigna Corp. Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **09 / 11 / 2014**
Transaction ID : 20140908-11959-20-23

Amount of Each Receipt this Period **19.25**

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

Mailing Address 1 Cigna Dr

City Bourbonnais State IL Zip Code 60914-4475

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

Name of Employer Cigna Corp. Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **09 / 25 / 2014**
Transaction ID : 20140922-11930-20-23

Amount of Each Receipt this Period **19.25**

SUBTOTAL of Receipts This Page (optional)..... **78.50**

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 71 OF 173
(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. Christopher J. Hocevar
 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 Multi-Segment Lead
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-8761-20-23
 Amount of Each Receipt this Period
 115.00

B. Christopher J. Hocevar
 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 Multi-Segment Lead
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-8740-20-23
 Amount of Each Receipt this Period
 115.00

C. Robert P. Hockmuth
 Full Name (Last, First, Middle Initial)
 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 Medical Senior Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 384.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-744-20-23
 Amount of Each Receipt this Period
 19.24

SUBTOTAL of Receipts This Page (optional)..... ▶ 249.24
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 72 OF 173
(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. Robert P. Hockmuth
 Full Name (Last, First, Middle Initial)
 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 Medical Senior Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 384.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-743-20-23
 Amount of Each Receipt this Period
 19.24

B. Michael Horlacher
 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
 CT GENERAL LIFE INSURANCE CO Architecture Director
 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
 09 / 11 / 2014
Transaction ID : 20140908-2813-20-23
 Amount of Each Receipt this Period
 40.00

C. Michael Horlacher
 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
 CT GENERAL LIFE INSURANCE CO Architecture Director
 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
 09 / 25 / 2014
Transaction ID : 20140922-2807-20-23
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 99.24
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 173
	<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. Tamara Horwitz
Full Name (Last, First, Middle Initial)
Mailing Address 3430 List Pl

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 Manager
---------------------------------	---

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
09	/	11	/	2014

Transaction ID : 20140908-15616-20-23

Amount of Each Receipt this Period

25.00

B. Tamara Horwitz
Full Name (Last, First, Middle Initial)
Mailing Address 3430 List Pl

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 Manager
---------------------------------	---

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
09	/	25	/	2014

Transaction ID : 20140922-15565-20-23

Amount of Each Receipt this Period

25.00

C. Julia M. Huggins
Full Name (Last, First, Middle Initial)
Mailing Address 10490 Little Patuxent Pkwy

City Columbia	State MD	Zip Code 21044-4928
------------------	-------------	------------------------

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 ▼ **1500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2014

Transaction ID : 20140908-480-20-23

Amount of Each Receipt this Period

75.00

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 74 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. Julia M. Huggins		Date of Receipt
Mailing Address 10490 Little Patuxent Pkwy		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Columbia State MD Zip Code 21044-4928		Transaction ID : 20140922-479-20-23
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 General Manager		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1500.00"/>

Full Name (Last, First, Middle Initial) B. Daven C. Hunigan		Date of Receipt
Mailing Address 7555 Goodwin Rd		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Chattanooga State TN Zip Code 37421-3183		Transaction ID : 20140922-3092-20-23
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 Systems Analysis Manager		<input type="text" value="10.24"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="201.02"/>

Full Name (Last, First, Middle Initial) C. Jay L. Hurt		Date of Receipt
Mailing Address 2900 North Loop W		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Houston State TX Zip Code 77092-8841		Transaction ID : 20140908-31867-20-23
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 General Manager		<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="2000.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="185.24"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 173
	<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. Jay L. Hurt
Full Name (Last, First, Middle Initial)

Mailing Address 2900 North Loop W

City Houston State TX Zip Code 77092-8841

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 ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-31909-20-23

Amount of Each Receipt this Period
 100.00

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

Mailing Address 212 Nathan Hale Dr

City Deptford State NJ Zip Code 08096-5148

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation IT Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.57

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1955-20-23

Amount of Each Receipt this Period
 12.96

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

Mailing Address 212 Nathan Hale Dr

City Deptford State NJ Zip Code 08096-5148

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation IT Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.57

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-1953-20-23

Amount of Each Receipt this Period
 13.02

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.98

TOTAL This Period (last page this line 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 173
	<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 Innes
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. Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-1673-20-23

Amount of Each Receipt this Period
19.25

B. Alan Innes
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. Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-1671-20-23

Amount of Each Receipt this Period
19.25

C. John M. Jacobs
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
Cigna Corp. Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-2675-20-23

Amount of Each Receipt this Period
25.00

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: (check only one)	PAGE 77 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. John M. Jacobs		Date of Receipt
Mailing Address 1601 Chestnut St # 2		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Philadelphia	State PA	Zip Code 19192-0002
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140922-2669-20-23
Name of Employer Cigna Corp.		Amount of Each Receipt this Period
Occupation Senior Counsel		<input type="text" value="2500"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Clifton S. Jacobson		Date of Receipt
Mailing Address 7034 Lakewood Blvd		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Dallas	State TX	Zip Code 75214-3558
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140908-31800-20-23
Name of Employer Cigna Corp.		Amount of Each Receipt this Period
Occupation Provider Contracting Director		<input type="text" value="192.30"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3846.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Clifton S. Jacobson		Date of Receipt
Mailing Address 7034 Lakewood Blvd		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Dallas	State TX	Zip Code 75214-3558
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20140922-31842-20-23
Name of Employer Cigna Corp.		Amount of Each Receipt this Period
Occupation Provider Contracting Director		<input type="text" value="192.30"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3846.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="409.60"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 78 OF 173
(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. William S. Jameson

Mailing Address 400 N Brand Blvd

City State Zip Code
 Glendale CA 91203-2311

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

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

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
 09 / 11 / 2014
Transaction ID : 20140908-6010-20-23

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 State Zip Code
 Glendale CA 91203-2311

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

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

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
 09 / 25 / 2014
Transaction ID : 20140922-5996-20-23

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. James M. Jeffers

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 Information Protection Dir

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-272-20-23

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 79 OF 173
	(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

Full Name (Last, First, Middle Initial) A. James M. Jeffers		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 Transaction ID : 20140922-272-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 50.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Information Protection Dir	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Nicole S. Jones		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2014 Transaction ID : 20140908-12318-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 192.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 3840.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation EVP and General Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Nicole S. Jones		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 Transaction ID : 20140922-12286-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 192.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 3840.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation EVP and General Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	434.00
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 80 OF 173
	<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. Teresa R. Jordan
Full Name (Last, First, Middle Initial)

Mailing Address 2900 North Loop W

City Houston State TX Zip Code 77092-8841

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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-30483-20-23

Amount of Each Receipt this Period
 50.00

B. Teresa R. Jordan
Full Name (Last, First, Middle Initial)

Mailing Address 2900 North Loop W

City Houston State TX Zip Code 77092-8841

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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-30537-20-23

Amount of Each Receipt this Period
 50.00

C. Scott Josephs
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 CT GENERAL LIFE INSURANCE CO Occupation Medical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-6532-20-23

Amount of Each Receipt this Period
 50.00

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

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

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

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

FOR LINE NUMBER: PAGE 81 OF 173
(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 Raleigh State NC Zip Code 27607-5084

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Medical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-6516-20-23

Amount of Each Receipt this Period
50.00

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

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 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
09 / 11 / 2014
Transaction ID : 20140908-9496-20-23

Amount of Each Receipt this Period
25.00

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

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 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
09 / 25 / 2014
Transaction ID : 20140922-9472-20-23

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 82 OF 173
	<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. Rhonda M. Karlin
 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 **240.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1654-20-23
 Amount of Each Receipt this Period
12.00

B. Rhonda M. Karlin
 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 **240.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-1652-20-23
 Amount of Each Receipt this Period
12.00

C. Joan Kennedy
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 NE Lofting Way
 City Stuart State FL Zip Code 34996-6512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation VP Consumer Health Engagement
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-22325-20-23
 Amount of Each Receipt this Period
160.00

SUBTOTAL of Receipts This Page (optional).....▶	184.00
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 173
(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 ▼
 3200.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-22236-20-23

Amount of Each Receipt this Period
 160.00

Full Name (Last, First, Middle Initial)
B. Edward S. Kim

Mailing Address 25500 N Norterra Dr
 Bldg B

City State Zip Code
 Phoenix AZ 85085-8200

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

Name of Employer Occupation
 Cigna Corp. General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-19871-20-23

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Edward S. Kim

Mailing Address 25500 N Norterra Dr
 Bldg B

City State Zip Code
 Phoenix AZ 85085-8200

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

Name of Employer Occupation
 Cigna Corp. General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-19801-20-23

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 260.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 173
	<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. Kristinn K. Klunkert
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 North Loop W
 City Houston State TX Zip Code 77092-8841
 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 **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-31884-20-23
 Amount of Each Receipt this Period
100.00

B. Kristinn K. Klunkert
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 North Loop W
 City Houston State TX Zip Code 77092-8841
 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 **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-31926-20-23
 Amount of Each Receipt this Period
100.00

C. James Kucharczyk
 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 Strategic Sourcing Sr Director
 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
 09 / 11 / 2014
Transaction ID : 20140908-19702-20-23
 Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....	275.00
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 85 OF 173
	<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) A. James Kucharczyk		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-19633-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 75.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 1500.00
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. Diana L. Kycia		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-878-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 16.67
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 305.03
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) ▼

Full Name (Last, First, Middle Initial) C. Diana L. Kycia		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-876-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 15.36
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 305.03
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) ▼

SUBTOTAL of Receipts This Page (optional).....▶	107.03
TOTAL This Period (last page this line 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 86 OF 173
	<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. Edward F. LaClair
 Full Name (Last, First, Middle Initial)
 Mailing Address 53 Glenmaura National Blvd
 City Scranton State PA Zip Code 18507-2132
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1816-20-23
 Amount of Each Receipt this Period
 20.00

B. Edward F. LaClair
 Full Name (Last, First, Middle Initial)
 Mailing Address 53 Glenmaura National Blvd
 City Scranton State PA Zip Code 18507-2132
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-1814-20-23
 Amount of Each Receipt this Period
 20.00

C. 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1290-20-23
 Amount of Each Receipt this Period
 50.00

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 87 OF 173
	<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. 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 ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-1289-20-23
 Amount of Each Receipt this Period 50.00

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 ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-22089-20-23
 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 ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-22003-20-23
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 88 OF 173
(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. James Lemieux

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 Information Protection Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1026-20-23

Amount of Each Receipt this Period
 50.00

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

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 Information Protection Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-1024-20-23

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Arthur W. Licon

Mailing Address 9701 W Higgins Rd

City State Zip Code
 Rosemont IL 60018-4703

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

Name of Employer Occupation
 Cigna Corp. Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-30590-20-23

Amount of Each Receipt this Period
 50.00

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

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

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

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

FOR LINE NUMBER: PAGE 89 OF 173
(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. Arthur W. Licon

Mailing Address 9701 W Higgins Rd

City State Zip Code
 Rosemont IL 60018-4703

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

Name of Employer Occupation
 Cigna Corp. Account Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-30643-20-23

Amount of Each Receipt this Period
 50.00

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

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 Information Protection Dir

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
 09 / 11 / 2014
Transaction ID : 20140908-9800-20-23

Amount of Each Receipt this Period
 25.00

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

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 Information Protection Dir

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
 09 / 25 / 2014
Transaction ID : 20140922-9775-20-23

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 90 OF 173
	<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. William M. Lopez

Mailing Address 1006 Columbine Rd

City Asheville State NC Zip Code 28803-1951

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 ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : 20140908-11994-20-23

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. William M. Lopez

Mailing Address 1006 Columbine Rd

City Asheville State NC Zip Code 28803-1951

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 ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-11965-20-23

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Scott A. Macchi

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 IT Sr Director

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
09 / 11 / 2014
Transaction ID : 20140908-786-20-23

Amount of Each Receipt this Period
30.00

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 91 OF 173
	<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. Scott A. Macchi
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 IT Sr Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **09 / 25 / 2014**

Transaction ID : 20140922-785-20-23

Amount of Each Receipt this Period **300.00**

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 ▼ **300.00**

Date of Receipt **09 / 11 / 2014**

Transaction ID : 20140908-5885-20-23

Amount of Each Receipt this Period **15.00**

C. 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 ▼ **300.00**

Date of Receipt **09 / 25 / 2014**

Transaction ID : 20140922-5870-20-23

Amount of Each Receipt this Period **15.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 OF 173
	(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

Full Name (Last, First, Middle Initial) A. William J. Maher		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-3077-20-23
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 ▼ 240.00
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) ▼		

Full Name (Last, First, Middle Initial) B. William J. Maher		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-3069-20-23
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 ▼ 240.00
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) ▼		

Full Name (Last, First, Middle Initial) C. Matthew G. Manders		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-1981-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 192.00
City Hartford	State CT Zip Code 06152-0001	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 3456.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Pres US Mkts & Global HC Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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: PAGE 93 OF 173
(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. Matthew G. Manders

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 Pres US Mkts & Global HC Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3456.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-1979-20-23

Amount of Each Receipt this Period
 192.00

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

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 ▼
 380.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-253-20-23

Amount of Each Receipt this Period
 19.00

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

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 ▼
 380.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-253-20-23

Amount of Each Receipt this Period
 19.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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 173
	(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

Full Name (Last, First, Middle Initial) A. Mark P. Marsters		Date of Receipt
Mailing Address 1601 Chestnut St # 2		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Philadelphia State PA Zip Code 19192-0002		Transaction ID : 20140908-9631-20-23
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation LIFE INS. CO. OF NORTH AMERICA VP Service Operations		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) B. Mark P. Marsters		Date of Receipt
Mailing Address 1601 Chestnut St # 2		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Philadelphia State PA Zip Code 19192-0002		Transaction ID : 20140922-9606-20-23
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation LIFE INS. CO. OF NORTH AMERICA VP Service Operations		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) C. Thomas J. Martel		Date of Receipt
Mailing Address 2223 Washington St		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Newton State MA Zip Code 02462-1417		Transaction ID : 20140908-9342-20-23
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 RVP Segment Lead		<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="2000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 95 OF 173
(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. Thomas J. Martel

Mailing Address 2223 Washington St

City State Zip Code
 Newton MA 02462-1417

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-9321-20-23

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Louise M. McCagg

Mailing Address 3601 Odonnell St

City State Zip Code
 Baltimore MD 21224-5238

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 ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-30406-20-23

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Louise M. McCagg

Mailing Address 3601 Odonnell St

City State Zip Code
 Baltimore MD 21224-5238

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 ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-30461-20-23

Amount of Each Receipt this Period
 50.00

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: (check only one)	PAGE 96 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Elaine McCarthy		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-2338-20-23
Mailing Address 300 Bellevue Pkwy Ste 101		Amount of Each Receipt this Period 20.00
City Wilmington	State DE	
Zip Code 19809-3704		Aggregate Year-to-Date ▼ 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Segment Marketing Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Elaine McCarthy		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-2333-20-23
Mailing Address 300 Bellevue Pkwy Ste 101		Amount of Each Receipt this Period 20.00
City Wilmington	State DE	
Zip Code 19809-3704		Aggregate Year-to-Date ▼ 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Segment Marketing Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Thomas A. McCarthy		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-8906-20-23
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 125.00
City Philadelphia	State PA	
Zip Code 19192-0002		Aggregate Year-to-Date ▼ 2500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation EVP CFO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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 CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-8885-20-23

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
B. Peter W. McCauley

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 Medical Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-17857-20-23

Amount of Each Receipt this Period
22.00

Full Name (Last, First, Middle Initial)
C. Peter W. McCauley

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 Medical Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-17795-20-23

Amount of Each Receipt this Period
22.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 169.00

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 173
(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. McDonald
 Full Name (Last, First, Middle Initial)
 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
 Cigna Corp. IT Senior Director
 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
 09 / 11 / 2014
Transaction ID : 20140908-21083-20-23
 Amount of Each Receipt this Period
 20.00

B. David J. McDonald
 Full Name (Last, First, Middle Initial)
 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
 Cigna Corp. IT Senior Director
 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
 09 / 25 / 2014
Transaction ID : 20140922-21007-20-23
 Amount of Each Receipt this Period
 20.00

C. Sheila McGinley-Graziosi
 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 General Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1351-20-23
 Amount of Each Receipt this Period
 50.00

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 99 OF 173
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. Sheila McGinley-Graziosi		Date of Receipt 09 / 25 / 2014 Transaction ID : 20140922-1350-20-23
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 General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Susan E. McMurray		Date of Receipt 09 / 11 / 2014 Transaction ID : 20140908-449-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 25.00
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 Accounting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Susan E. McMurray		Date of Receipt 09 / 25 / 2014 Transaction ID : 20140922-448-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 25.00
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 Accounting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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 100 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. Marta Meester		Date of Receipt
Mailing Address 3636 Nobel Dr		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City San Diego State CA Zip Code 92122-1022		Transaction ID : 20140908-5976-20-23
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna HEALTHCARE OF CA, INC. Occupation Provider Contracting 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="400.00"/>	

Full Name (Last, First, Middle Initial) B. Marta Meester		Date of Receipt
Mailing Address 3636 Nobel Dr		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City San Diego State CA Zip Code 92122-1022		Transaction ID : 20140922-5962-20-23
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cigna HEALTHCARE OF CA, INC. Occupation Provider Contracting 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="400.00"/>	

Full Name (Last, First, Middle Initial) C. Gregory J. Miller		Date of Receipt
Mailing Address 530 Great Circle Rd		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Nashville State TN Zip Code 37228-1309		Transaction ID : 20140908-30445-20-23
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 Market Manager		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="65.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial)
A. Gregory J. Miller

Mailing Address 530 Great Circle Rd

City Nashville State TN Zip Code 37228-1309

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

Name of Employer Cigna Corp. Occupation Market Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : 20140922-30499-20-23

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. David E. Mino

Mailing Address 103 Lafayette Dr

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:
 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
09 / 11 / 2014

Transaction ID : 20140908-9679-20-23

Amount of Each Receipt this Period
15.00

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

Mailing Address 103 Lafayette Dr

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:
 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
09 / 25 / 2014

Transaction ID : 20140922-9654-20-23

Amount of Each Receipt this Period
15.00

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: (check only one)	PAGE 102 OF 173
	<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. 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 General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1380.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-6301-20-23

Amount of Each Receipt this Period 75.00

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 General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1380.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-6287-20-23

Amount of Each Receipt this Period 75.00

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 ▼ 400.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-4305-20-23

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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 103 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Kymberly P. Miranda		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-4293-20-23
Mailing Address 520 SE 5th Ave		Amount of Each Receipt this Period 20.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Jodie K. Mirfendereski		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-3670-20-23
Mailing Address 104 Glenlivet Pl		Amount of Each Receipt this Period 12.29
City Powell	State OH	Zip Code 43065-9699
FEC ID number of contributing federal political committee. C	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Project Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.78	

Full Name (Last, First, Middle Initial) C. Jodie K. Mirfendereski		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-3659-20-23
Mailing Address 104 Glenlivet Pl		Amount of Each Receipt this Period 12.36
City Powell	State OH	Zip Code 43065-9699
FEC ID number of contributing federal political committee. C	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Project Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.78	

SUBTOTAL of Receipts This Page (optional).....▶	44.65
TOTAL This Period (last page this line 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 104 OF 173
	<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. Frank A. Monahan
Full Name (Last, First, Middle Initial)

Mailing Address 7400 W 110th St

City Overland Park State KS Zip Code 66210-2358

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 ▼ 2000.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-10616-20-23

Amount of Each Receipt this Period
100.00

B. Frank A. Monahan
Full Name (Last, First, Middle Initial)

Mailing Address 7400 W 110th St

City Overland Park State KS Zip Code 66210-2358

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 ▼ 2000.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-10590-20-23

Amount of Each Receipt this Period
100.00

C. 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 Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-17605-20-23

Amount of Each Receipt this Period
175.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00

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 105 OF 173
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial)
A. Alan M. Mune

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 Total Med/Chief Med Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-17543-20-23

Amount of Each Receipt this Period
175.00

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

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. EVP Human Resources & Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-9905-20-23

Amount of Each Receipt this Period
100.00

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

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. EVP Human Resources & Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-9880-20-23

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 173
	<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. 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 ▼ 240.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-7722-20-23

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 ▼ 240.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-7704-20-23

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 ▼ 1500.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-4277-20-23

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 99.00

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 173
	<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. 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 ▼ 1500.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-4265-20-23

Amount of Each Receipt this Period
75.00

B. Noreen Nageotte
Full Name (Last, First, Middle Initial)

Mailing Address 28205 W Oviatt Rd

City Bay Village State OH Zip Code 44140-2110

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 ▼ 1500.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-6753-20-23

Amount of Each Receipt this Period
75.00

C. Noreen Nageotte
Full Name (Last, First, Middle Initial)

Mailing Address 28205 W Oviatt Rd

City Bay Village State OH Zip Code 44140-2110

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 ▼ 1500.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-6736-20-23

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Laurinda M. Newell		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-9727-20-23
Mailing Address 25500 N Norterra Dr Bldg B		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	
Zip Code 85085-8200		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Laurinda M. Newell		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-9702-20-23
Mailing Address 25500 N Norterra Dr Bldg B		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	
Zip Code 85085-8200		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Daniel Nicoll		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-1886-20-23
Mailing Address 3 Huntington Quad		Amount of Each Receipt this Period 26.93
City Melville	State NY	
Zip Code 11747-4602		Amount of Each Receipt this Period 538.60
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Medical Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	126.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 173
	<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. Daniel Nicoll
Full Name (Last, First, Middle Initial)

Mailing Address 3 Huntington Quad

City Melville State NY Zip Code 11747-4602

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 ▼ **538.60**

Date of Receipt **09 / 25 / 2014**
Transaction ID : 20140922-1884-20-23

Amount of Each Receipt this Period **26.93**

B. Michael T. Nole
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 Cigna Corp. Occupation Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **09 / 11 / 2014**
Transaction ID : 20140908-16626-20-23

Amount of Each Receipt this Period **50.00**

C. Michael T. Nole
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 Cigna Corp. Occupation Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **09 / 25 / 2014**
Transaction ID : 20140922-16568-20-23

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **126.93**

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

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

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

FOR LINE NUMBER: PAGE 110 OF 173
(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. Richard S. Novack
 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 General Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-16462-20-23
 Amount of Each Receipt this Period
 50.00

B. Richard S. Novack
 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 General Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-16405-20-23
 Amount of Each Receipt this Period
 50.00

C. Eliana M. 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1148-20-23
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 111 OF 173
(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. Eliana M. Nunez

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 Operating Effectiveness Sr Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-1147-20-23

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. William J. O'Donnell

Mailing Address 499 Washington Blvd

City State Zip Code
 Jersey City NJ 07310-1995

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

Name of Employer Occupation
 Cigna Corp. Provider Contracting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-1494-20-23

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. William J. O'Donnell

Mailing Address 499 Washington Blvd

City State Zip Code
 Jersey City NJ 07310-1995

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

Name of Employer Occupation
 Cigna Corp. Provider Contracting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-14895-20-23

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

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

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

FOR LINE NUMBER: PAGE 112 OF 173
(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 Oates
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 Patterson Rd
 City Austin State TX Zip Code 78733-6500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Government Affairs Sr Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3846.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-12250-20-23
 Amount of Each Receipt this Period
 192.30

B. John Oates
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 Patterson Rd
 City Austin State TX Zip Code 78733-6500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Government Affairs Sr Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3846.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-12218-20-23
 Amount of Each Receipt this Period
 192.30

C. Eric P. Palmer
 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 Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-5496-20-23
 Amount of Each Receipt this Period
 192.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 576.60
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 113 OF 173
(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. 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 ▼
 3840.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-5483-20-23

Amount of Each Receipt this Period
 192.00

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 ▼
 385.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-4548-20-23

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 ▼
 385.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-4535-20-23

Amount of Each Receipt this Period
 19.25

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.50

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 114 OF 173
(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. Mark A. Parsons
 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 SVP Reinsurance
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-426-20-23
 Amount of Each Receipt this Period
 50.00

B. Mark A. Parsons
 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 SVP Reinsurance
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-426-20-23
 Amount of Each Receipt this Period
 50.00

C. Allen C. Perez
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 North Loop W
 City State Zip Code
 Houston TX 77092-8841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cigna Corp. Marketing Product Sr Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-31861-20-23
 Amount of Each Receipt this Period
 100.00

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: (check only one)	PAGE 115 OF 173
	<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. Allen C. Perez		Date of Receipt 09 / 25 / 2014 Transaction ID : 20140922-31903-20-23
Mailing Address 2900 North Loop W		Amount of Each Receipt this Period 100.00
City Houston	State TX	
Zip Code 77092-8841		Aggregate Year-to-Date ▼ 2000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Marketing Product Sr Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Heather R. Peterson		Date of Receipt 09 / 11 / 2014 Transaction ID : 20140908-30580-20-23
Mailing Address 530 Great Circle Rd		Amount of Each Receipt this Period 50.00
City Nashville	State TN	
Zip Code 37228-1309		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Financial Analysis Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Heather R. Peterson		Date of Receipt 09 / 25 / 2014 Transaction ID : 20140922-30633-20-23
Mailing Address 530 Great Circle Rd		Amount of Each Receipt this Period 50.00
City Nashville	State TN	
Zip Code 37228-1309		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Financial Analysis Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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 116 OF 173
	(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

Full Name (Last, First, Middle Initial) A. Danthu T. Phan		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-10706-20-23
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 50.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
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 ▼	

Full Name (Last, First, Middle Initial) B. Danthu T. Phan		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-10680-20-23
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 50.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
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 ▼	

Full Name (Last, First, Middle Initial) C. Robert D. Picinich		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-1976-20-23
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		Amount of Each Receipt this Period 500.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

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 117 OF 173
(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. 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 ▼ 500.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-1974-20-23
 Amount of Each Receipt this Period 25.00

B. Jeremiah Pierson
 Full Name (Last, First, Middle Initial)
 Mailing Address 317 Spy Glass Hill Rd
 City Bath State PA Zip Code 18014-1631
 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 ▼ 600.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-22706-20-23
 Amount of Each Receipt this Period 30.00

C. Jeremiah Pierson
 Full Name (Last, First, Middle Initial)
 Mailing Address 317 Spy Glass Hill Rd
 City Bath State PA Zip Code 18014-1631
 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 ▼ 600.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-22615-20-23
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 118 OF 173
(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. Charles C. Pitts

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
 Cigna Corp. General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-12443-20-23

Amount of Each Receipt this Period
 40.00

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

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
 Cigna Corp. General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-12412-20-23

Amount of Each Receipt this Period
 40.00

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

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 Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-1239-20-23

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 173
	<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. David M. Porcello
 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 Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-1238-20-23
 Amount of Each Receipt this Period
 50.00

B. Jonathan M. Prokup
 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 ▼ 1000.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-21961-20-23
 Amount of Each Receipt this Period
 50.00

C. Jonathan M. Prokup
 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 ▼ 1000.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-21876-20-23
 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 120 OF 173
	<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. Philip Rabinowitz
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Park Lane Dr

City Pittsburgh State PA Zip Code 15275

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 ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : 20140908-11473-20-23

Amount of Each Receipt this Period
40.00

B. Philip Rabinowitz
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Park Lane Dr

City Pittsburgh State PA Zip Code 15275

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 ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-11448-20-23

Amount of Each Receipt this Period
40.00

C. Edward J. Rado
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 IT Senior Director

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
09 / 11 / 2014
Transaction ID : 20140908-16158-20-23

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **155.00**

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

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

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

FOR LINE NUMBER: PAGE 121 OF 173
(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. Edward J. Rado

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. IT Senior Director

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
 09 / 25 / 2014
Transaction ID : 20140922-16103-20-23

Amount of Each Receipt this Period
 75.00

Full Name (Last, First, Middle Initial)
B. Eugene J. Rapisardi

Mailing Address 400 N Brand Blvd

City State Zip Code
 Glendale CA 91203-2311

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

Name of Employer Occupation
 Cigna Corp. General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-13960-20-23

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Eugene J. Rapisardi

Mailing Address 400 N Brand Blvd

City State Zip Code
 Glendale CA 91203-2311

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

Name of Employer Occupation
 Cigna Corp. General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-13914-20-23

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: PAGE 122 OF 173
(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. William J. Reedy

Mailing Address Stapley Corporate Center

City State Zip Code
 Mesa AZ 85204

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

Name of Employer Occupation
 Cigna HEALTHCARE OF AZ, INC Urgent Care Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-5438-20-23

Amount of Each Receipt this Period
 20.00

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

Mailing Address Stapley Corporate Center

City State Zip Code
 Mesa AZ 85204

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

Name of Employer Occupation
 Cigna HEALTHCARE OF AZ, INC Urgent Care Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-5424-20-23

Amount of Each Receipt this Period
 20.00

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

Mailing Address 525 W Monroe St

City State Zip Code
 Chicago IL 60661-3629

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

Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO Sales Administration Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-3841-20-23

Amount of Each Receipt this Period
 15.00

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 123 OF 173
(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. Brett A. Reinholz

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 ▼ **300.00**

Date of Receipt **09 / 25 / 2014**
Transaction ID : 20140922-3829-20-23

Amount of Each Receipt this Period **15.00**

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

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 Strategy and Bus Developmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 11 / 2014**
Transaction ID : 20140908-619-20-23

Amount of Each Receipt this Period **25.00**

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

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 Strategy and Bus Developmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 25 / 2014**
Transaction ID : 20140922-617-20-23

Amount of Each Receipt this Period **25.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 173
	<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. Jeffrey T. Rigg
 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 Internal Audit
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-19512-20-23
 Amount of Each Receipt this Period
100.00

B. Jeffrey T. Rigg
 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 Internal Audit
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-19445-20-23
 Amount of Each Receipt this Period
100.00

C. Catherine M. Riley
 Full Name (Last, First, Middle Initial)
 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 **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1950-20-23
 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:	PAGE 125 OF 173
	(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

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 ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : 20140922-1948-20-23

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 ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014

Transaction ID : 20140908-16504-20-23

Amount of Each Receipt this Period
21.00

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 ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : 20140922-16447-20-23

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **92.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 126 OF 173
	(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. Kevin L. Ritchie
Full Name (Last, First, Middle Initial)

Mailing Address 140 E 45th St

City New York State NY Zip Code 10017-3144

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 ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-792-20-23

Amount of Each Receipt this Period
 75.00

B. Kevin L. Ritchie
Full Name (Last, First, Middle Initial)

Mailing Address 140 E 45th St

City New York State NY Zip Code 10017-3144

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 ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-791-20-23

Amount of Each Receipt this Period
 75.00

c. John Rottkamp
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 Enterprise Underwriting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1775-20-23

Amount of Each Receipt this Period
 100.00

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:	PAGE 127 OF 173
	(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

Full Name (Last, First, Middle Initial) A. John Rottkamp		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code Hartford CT 06152-0001		Transaction ID : 20140922-1773-20-23
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 CT GENERAL LIFE INSURANCE CO	Occupation VP Enterprise Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	

Full Name (Last, First, Middle Initial) B. Diane C. Russell		Date of Receipt
Mailing Address 1601 Chestnut St # 2		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City State Zip Code Philadelphia PA 19192-0002		Transaction ID : 20140908-2751-20-23
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Marketing Product Sr Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Diane C. Russell		Date of Receipt
Mailing Address 1601 Chestnut St # 2		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code Philadelphia PA 19192-0002		Transaction ID : 20140922-2745-20-23
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Marketing Product Sr Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="130.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 128 OF 173
(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. Richard B. Salmon
 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 Medical Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-1810-20-23
 Amount of Each Receipt this Period
 30.00

B. Richard B. Salmon
 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 Medical Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-1808-20-23
 Amount of Each Receipt this Period
 30.00

c. Jon L. Sandberg
 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 Comm Sr Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-21834-20-23
 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: PAGE 129 OF 173
(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. Jon L. Sandberg

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 Comm Sr Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-21750-20-23

Amount of Each Receipt this Period
 50.00

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

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 VP Operating Effectiveness

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-7648-20-23

Amount of Each Receipt this Period
 192.00

Full Name (Last, First, Middle Initial)
C. Paul A. Sanford

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 VP Operating Effectiveness

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-7630-20-23

Amount of Each Receipt this Period
 192.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 434.00

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 130 OF 173
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. David N. Sasportas		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2014 Transaction ID : 20140908-377-20-23
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 Project Management Sr Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. David N. Sasportas		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 Transaction ID : 20140922-377-20-23
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 Project Management Sr Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Frank Sataline		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2014 Transaction ID : 20140908-427-20-23
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 85.00
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 SVP Chief Investment Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	

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: (check only one)	PAGE 131 OF 173
	<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. Frank Sataline
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 Chief Investment Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-427-20-23

Amount of Each Receipt this Period 85.00

B. David A. Savino
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 Compliance Sr Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-588-20-23

Amount of Each Receipt this Period 25.00

C. David A. Savino
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 Compliance Sr Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-586-20-23

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. Frederick E. Scardellette		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-2723-20-23
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 15.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Provider Contracting Sr Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Frederick E. Scardellette		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-2717-20-23
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 15.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Provider Contracting Sr Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) c. David S. Scheibe		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-1312-20-23
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 50.00
City Philadelphia	State PA Zip Code 19192-0002	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Treasury Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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 134 OF 173
	<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. 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 **1000.00**

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-962-20-23
 Amount of Each Receipt this Period
50.00

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 **1000.00**

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-960-20-23
 Amount of Each Receipt this Period
50.00

C. Marcus D. Skipwith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Chase Corporate Dr
 City Hoover State AL Zip Code 35244-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation App Development Sr Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-31427-20-23
 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 135 OF 173
(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. Marcus D. Skipwith

Mailing Address 2 Chase Corporate Dr

City Hoover State AL Zip Code 35244-1016

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

Name of Employer Cigna Corp. Occupation App Development Sr 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
09 / 25 / 2014
Transaction ID : 20140922-31472-20-23

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Jay Smith

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 ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014
Transaction ID : 20140908-9774-20-23

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Jay Smith

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 ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : 20140922-9749-20-23

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 136 OF 173
(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. Raymond Smithberger

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 ▼
 385.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-9841-20-23

Amount of Each Receipt this Period
 19.25

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

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 ▼
 385.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-9816-20-23

Amount of Each Receipt this Period
 19.25

Full Name (Last, First, Middle Initial)
C. Diana Sousa

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 Comm Sr Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1800.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-19623-20-23

Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 128.50

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 137 OF 173
	(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. Diana Sousa
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 Comm Sr Director
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

Transaction ID : 20140922-19555-20-23

Amount of Each Receipt this Period
90.00

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 ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2014

Transaction ID : 20140908-9928-20-23

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 ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

Transaction ID : 20140922-9903-20-23

Amount of Each Receipt this Period
19.25

SUBTOTAL of Receipts This Page (optional).....▶	128.50
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 138 OF 173
	(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

Full Name (Last, First, Middle Initial) A. Jennifer Stepp		Date of Receipt
Mailing Address 4144 Central Ave		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City State Zip Code Indianapolis IN 46205-2605		Transaction ID : 20140908-3807-20-23
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="14.81"/>
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Account Manager-National Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="382.87"/>	

Full Name (Last, First, Middle Initial) B. Jennifer Stepp		Date of Receipt
Mailing Address 4144 Central Ave		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code Indianapolis IN 46205-2605		Transaction ID : 20140922-3796-20-23
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="14.88"/>
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Account Manager-National Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="382.87"/>	

Full Name (Last, First, Middle Initial) C. Daniel M. Sullivan		Date of Receipt
Mailing Address 1000 Corporate Centre Dr		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City State Zip Code Franklin TN 37067-2611		Transaction ID : 20140908-1518-20-23
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="44.69"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 173
	<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

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. 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 ▼ 300.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-1517-20-23

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 ▼ 538.60

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-10406-20-23

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 ▼ 538.60

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-10380-20-23

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 140 OF 173
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. Gerald T. Sweeney
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 Information Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3840.00**

Date of Receipt **09 / 11 / 2014**
Transaction ID : 20140908-16216-20-23

Amount of Each Receipt this Period **192.00**

B. Gerald T. Sweeney
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 Information Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3840.00**

Date of Receipt **09 / 25 / 2014**
Transaction ID : 20140922-16161-20-23

Amount of Each Receipt this Period **192.00**

C. Paul C. Sweeney
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 Cigna Corp. Occupation Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **09 / 11 / 2014**
Transaction ID : 20140908-12796-20-23

Amount of Each Receipt this Period **15.00**

SUBTOTAL of Receipts This Page (optional)..... **399.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 173
	<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 C. Sweeney
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 Cigna Corp. Occupation Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-12760-20-23

Amount of Each Receipt this Period
15.00

B. 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 ▼ 368.29

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-3789-20-23

Amount of Each Receipt this Period
18.53

c. 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 ▼ 368.29

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-3778-20-23

Amount of Each Receipt this Period
18.59

SUBTOTAL of Receipts This Page (optional)..... ▶ 52.12

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 142 OF 173
	(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. 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 ▼
1000.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-7952-20-23

Amount of Each Receipt this Period
50.00

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 ▼
1000.00

Date of Receipt
09 / 25 / 2014
Transaction ID : 20140922-7933-20-23

Amount of Each Receipt this Period
50.00

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 ▼
1000.00

Date of Receipt
09 / 11 / 2014
Transaction ID : 20140908-9806-20-23

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 143 OF 173
	<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. 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 ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-9781-20-23

Amount of Each Receipt this Period 50.00

B. Stephen M. Thomas
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 Information Protection Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-747-20-23

Amount of Each Receipt this Period 50.00

C. Stephen M. Thomas
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 Information Protection Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-746-20-23

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 144 OF 173
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. Jeffrey E. Tindall		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2014 Transaction ID : 20140908-10592-20-23
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. C	Name of Employer Cigna Corp.	Occupation Government Affairs Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Jeffrey E. Tindall		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 Transaction ID : 20140922-10566-20-23
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. C	Name of Employer Cigna Corp.	Occupation Government Affairs Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Rhonda L. Toole		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2014 Transaction ID : 20140908-3326-20-23
Mailing Address 5556 Indigo Fields Blvd		Amount of Each Receipt this Period 15.00
City North Charleston	State SC	Zip Code 29418-2626
FEC ID number of contributing federal political committee. C	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Segment Marketing Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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: (check only one)	PAGE 145 OF 173
	<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. Rhonda L. Toole
Full Name (Last, First, Middle Initial)

Mailing Address 5556 Indigo Fields Blvd

City North Charleston State SC Zip Code 29418-2626

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Segment Marketing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-3316-20-23

Amount of Each Receipt this Period 15.00

B. Michael W. Triplett
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 Segment Lead

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-675-20-23

Amount of Each Receipt this Period 100.00

C. Michael W. Triplett
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 Segment Lead

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-673-20-23

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 215.00

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 146 OF 173
	<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. 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 ▼ 1500.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-7589-20-23

Amount of Each Receipt this Period 75.00

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 ▼ 1500.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-7570-20-23

Amount of Each Receipt this Period 75.00

C. Jennifer L. Velasquez
Full Name (Last, First, Middle Initial)

Mailing Address Health Plans Inc

City Miami State FL Zip Code 33165

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 ▼ 1000.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-31981-20-23

Amount of Each Receipt this Period 50.00

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: (check only one)	PAGE 147 OF 173
	<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. Jennifer L. Velasquez
 Full Name (Last, First, Middle Initial)
 Mailing Address Health Plans Inc
 City Miami State FL Zip Code 33165
 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 ▼ 1000.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-32021-20-23
 Amount of Each Receipt this Period
 50.00

B. Martha I. Vinas
 Full Name (Last, First, Middle Initial)
 Mailing Address 5304 Fishhawk Ridge Dr
 City Lithia State FL Zip Code 33547-3966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Business Project Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-20811-20-23
 Amount of Each Receipt this Period
 25.00

C. Martha I. Vinas
 Full Name (Last, First, Middle Initial)
 Mailing Address 5304 Fishhawk Ridge Dr
 City Lithia State FL Zip Code 33547-3966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Business Project Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-20736-20-23
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 148 OF 173
(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. Brian Wallach

Mailing Address 1601 Chestnut St
 # TL18R

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 Provider Contracting Sr Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 478.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-6774-20-23

Amount of Each Receipt this Period
 29.93

Full Name (Last, First, Middle Initial)
B. Patricia J. Walsh

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 Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-19555-20-23

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. Patricia J. Walsh

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 Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-19488-20-23

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 229.93

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 149 OF 173
	(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. Joseph Wankerl
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 Provider Contracting Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-8029-20-23

Amount of Each Receipt this Period 10.10

B. Justin J. Warrington
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 Financial Strategy Sr Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-2115-20-23

Amount of Each Receipt this Period 20.00

C. Justin J. Warrington
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 Financial Strategy Sr Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-2112-20-23

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.10

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 150 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Philip J. Wasden		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-4893-20-23
Mailing Address Two Securities Centre		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF GA, INC.	Occupation Manager Account Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Philip J. Wasden		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-4879-20-23
Mailing Address Two Securities Centre		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA HEALTHCARE OF GA, INC.	Occupation Manager Account Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Eric E. Wawrzon		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-32186-20-23
Mailing Address 530 Great Circle Rd		Amount of Each Receipt this Period 20.00
City Nashville	State TN	Zip Code 37228-1309
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Technical Support Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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 151 OF 173
	<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. Eric E. Wawrzon
Full Name (Last, First, Middle Initial)

Mailing Address 530 Great Circle Rd

City Nashville State TN Zip Code 37228-1309

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

Name of Employer Cigna Corp. Occupation Technical Support Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-32226-20-23

Amount of Each Receipt this Period 20.00

B. Peter B. Welch
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 CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-7376-20-23

Amount of Each Receipt this Period 25.00

C. Peter B. Welch
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 CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-7357-20-23

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 152 OF 173
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. William M. Welch		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City State Zip Code Hartford CT 06152-0001		Transaction ID : 20140908-21847-20-23
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="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="1000.00"/>	

Full Name (Last, First, Middle Initial) B. William M. Welch		Date of Receipt
Mailing Address 900 Cottage Grove Rd		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code Hartford CT 06152-0001		Transaction ID : 20140922-21763-20-23
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="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="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Jennifer L. Wheatley		Date of Receipt
Mailing Address 8505 E Orchard Rd		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City State Zip Code Greenwood Village CO 80111-5002		Transaction ID : 20140908-15442-20-23
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. Senior Counsel		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 153 OF 173
(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. Jennifer L. Wheatley
 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 Senior Counsel
 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
 09 / 25 / 2014
Transaction ID : 20140922-15392-20-23
 Amount of Each Receipt this Period
 25.00

B. 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-10237-20-23
 Amount of Each Receipt this Period
 20.00

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 CT GENERAL LIFE INSURANCE CO Occupation Financial Analysis Sr Dir
 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
 09 / 25 / 2014
Transaction ID : 20140922-10213-20-23
 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 154 OF 173
	<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. Reginald White
 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 Sales Director-Sales Mgt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-10875-20-23
 Amount of Each Receipt this Period
50.00

B. Reginald White
 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 Sales Director-Sales Mgt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-10850-20-23
 Amount of Each Receipt this Period
50.00

C. Lance Wilkes
 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 Strategy Sr Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1150.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-7573-20-23
 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 155 OF 173
	<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. 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 ▼
 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-7554-20-23
 Amount of Each Receipt this Period
 50.00

B. Diane M. Wilkosz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2701 N Rocky Point Dr
 City State Zip Code
 Tampa FL 33607-5917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CIGNA HEALTHCARE OF FL, INC Provider Contracting Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 888.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : 20140908-1861-20-23
 Amount of Each Receipt this Period
 74.00

C. Diane M. Wilkosz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2701 N Rocky Point Dr
 City State Zip Code
 Tampa FL 33607-5917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CIGNA HEALTHCARE OF FL, INC Provider Contracting Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 888.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-1859-20-23
 Amount of Each Receipt this Period
 74.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 198.00
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 156 OF 173
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Daniel Wiss		Date of Receipt
Mailing Address 231 S Bemiston Ave		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Clayton State MO Zip Code 63105-1914		Transaction ID : 20140908-8781-20-23
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="40.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="800.00"/>	

Full Name (Last, First, Middle Initial) B. Daniel Wiss		Date of Receipt
Mailing Address 231 S Bemiston Ave		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Clayton State MO Zip Code 63105-1914		Transaction ID : 20140922-8760-20-23
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="40.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="800.00"/>	

Full Name (Last, First, Middle Initial) C. Bradley A. Wolfram		Date of Receipt
Mailing Address 11200 Lakeline Blvd Ste 100		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Austin State TX Zip Code 78717-5964		Transaction ID : 20140908-32583-20-23
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 Operations Senior Director		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="155.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 157 OF 173
	(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

Full Name (Last, First, Middle Initial) A. Bradley A. Wolfram		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-32620-20-23
Mailing Address 11200 Lakeline Blvd Ste 100		Amount of Each Receipt this Period 75.00
City Austin	State TX	
Zip Code 78717-5964		Aggregate Year-to-Date ▼ 1500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Operations Senior Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. John M. Wray		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : 20140908-22755-20-23
Mailing Address 140 E 45th St		Amount of Each Receipt this Period 175.00
City New York	State NY	
Zip Code 10017-3144		Aggregate Year-to-Date ▼ 3500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation VP Network Delivery Systems	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. John M. Wray		Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : 20140922-22664-20-23
Mailing Address 140 E 45th St		Amount of Each Receipt this Period 175.00
City New York	State NY	
Zip Code 10017-3144		Aggregate Year-to-Date ▼ 3500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation VP Network Delivery Systems	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 158 OF 173
(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. 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 ▼
 1100.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-7327-20-23

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. 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 ▼
 1100.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : 20140922-7308-20-23

Amount of Each Receipt this Period
 55.00

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

Mailing Address 9 Griffin Rd. North, Data Center

City State Zip Code
 Windsor CT 06095

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

Name of Employer Occupation
 Cigna Corp. Technical Support Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : 20140908-21091-20-23

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 173
	<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. John Yardley
Full Name (Last, First, Middle Initial)

Mailing Address 9 Griffin Rd. North, Data Center

City Windsor State CT Zip Code 06095

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

Name of Employer Cigna Corp. Occupation Technical Support Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-21015-20-23

Amount of Each Receipt this Period 25.00

B. Jeffrey Young
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/Analytics Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-296-20-23

Amount of Each Receipt this Period 25.00

C. Jeffrey Young
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/Analytics Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-296-20-23

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 160 OF 173
	<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

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 G. Zach
Full Name (Last, First, Middle Initial)

Mailing Address 9 Heritage Ln

City Phoenixville State PA Zip Code 19460-4607

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

Name of Employer Cigna Corp. Occupation Sales Director-Sales Mgt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-25124-20-23

Amount of Each Receipt this Period 75.00

B. David G. Zach
Full Name (Last, First, Middle Initial)

Mailing Address 9 Heritage Ln

City Phoenixville State PA Zip Code 19460-4607

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

Name of Employer Cigna Corp. Occupation Sales Director-Sales Mgt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 25 / 2014
Transaction ID : 20140922-25013-20-23

Amount of Each Receipt this Period 75.00

C. George Zaruba
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 Information Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3080.00

Date of Receipt 09 / 11 / 2014
Transaction ID : 20140908-23311-20-23

Amount of Each Receipt this Period 154.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 304.00

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

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

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

FOR LINE NUMBER: PAGE 161 OF 173
(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. George Zaruba
 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 Information Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3080.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : 20140922-23217-20-23
 Amount of Each Receipt this Period
 154.00

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

SUBTOTAL of Receipts This Page (optional).....▶	154.00
TOTAL This Period (last page this line number only).....▶	24900.18

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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. Anna Eshoo for Congress

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
2014 General

011

Candidate Name

Anna G. Eshoo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 18

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : 30DB40701FE3A178B54

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Capito for West Virginia

Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement
2014 General

011

Candidate Name

Shelley Moore Capito

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 6B9091BEAE69B1687AC

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Cartwright for Congress

Mailing Address PO Box 1805

City Plains State PA Zip Code 18705

Purpose of Disbursement
2014 General

011

Candidate Name

Matthew A. Cartwright

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 17

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : A60A061F10BDE07CD78

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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. Committee To Re-Elect Linda Sanchez

Mailing Address 410 1st St SE
Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement
2014 General

011

Candidate Name

Linda T. Sanchez

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 38

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	4

Transaction ID : C7C2A9B9572F790D58B

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Cooper for Congress

Mailing Address C/O Dglf Cpas & Business Advisors
PO Box 198087

City Nashville State TN Zip Code 37219

Purpose of Disbursement
2014 General

011

Candidate Name

Jim Cooper

Category/
Type

Office Sought: House
 Senate
 President
State: TN District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	4

Transaction ID : 846DB8D87116F0A1438

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Courtney for Congress

Mailing Address PO Box 1372

City Vernon State CT Zip Code 06066

Purpose of Disbursement
2014 General

011

Candidate Name

Joseph D. Courtney

Category/
Type

Office Sought: House
 Senate
 President
State: CT District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	4

Transaction ID : 6DF3CA45C169B957F4A

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

5	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

5	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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. David Scott for Congress

Mailing Address PO Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement
2014 General

011

Candidate Name

David Albert Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: GA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	4

Transaction ID : 9211C3D0B6B26D79298

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Davis for Congress/Friends of Davis

Mailing Address 5956 W. Race Avenue

City Chicago State IL Zip Code 60644

Purpose of Disbursement
2014 General

011

Candidate Name

Danny K. Davis

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	4

Transaction ID : 9DF96B6EE24BB48F345

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Diane Black for Congress

Mailing Address PO Box 1437

City Gallatin State TN Zip Code 37066-1437

Purpose of Disbursement
2014 General

011

Candidate Name

Diane Black

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	4

Transaction ID : 976B6A2B49FCCC4CDE5

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
2	5	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0
4	5	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0
4	5	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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. Doyle for Congress Committee

Mailing Address 205 Hawthorne Court

City Pittsburgh State PA Zip Code 15221

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Michael F. Doyle

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 14

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 9AB6667E1C8F4AE3138

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Fattah for Congress

Mailing Address 3900 Ford Road
Suite 120

City Philadelphia State PA Zip Code 19131

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Chaka Fattah

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 02

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 464B9190960DB41E37D

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Fearless PAC

Mailing Address PO Box 37

City Boulder State CO Zip Code 80306

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Fearless PAC

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 8EEA6C19ADF9D192B47

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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. Friends of Elizabeth Esty

Mailing Address PO Box 61

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
2014 General

011

Candidate Name

Elizabeth Esty

Category/
Type

Office Sought: House
 Senate
 President
State: CT District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : AE27BBFF27BE4820303

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Mark Warner

Mailing Address 2034 Eisenhower Avenue, Suite 222

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2014 General

011

Candidate Name

Mark Robert Warner

Category/
Type

Office Sought: House
 Senate
 President
State: VA District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : 2EA44655CC55FB0BB65

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Sam Johnson

Mailing Address PO Box 860096

City Plano State TX Zip Code 75086

Purpose of Disbursement
2014 General

011

Candidate Name

Samuel Robert Johnson

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 4F3D3EF201B9896CD51

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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. Friends of Todd Young, Inc.

Mailing Address PO Box 1053

City Bloomington State IN Zip Code 47402

Purpose of Disbursement
2014 General

011

Candidate Name
Todd Christopher Young

Category/
Type

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	4

Transaction ID : 79E37B572631D45E674

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Graves for Congress

Mailing Address PO Box 335

City Calhoun State GA Zip Code 30703

Purpose of Disbursement
2014 General

011

Candidate Name
John Thomas Graves

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 14

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	4

Transaction ID : 8C4F2843ED762F9D516

Amount of Each Disbursement this Period

2	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Hagan for US Senate Inc

Mailing Address PO Box 29103

City Greensboro State NC Zip Code 27429-9103

Purpose of Disbursement
2014 General

011

Candidate Name
Kay R. Hagan

Category/
Type

Office Sought: House
 Senate
 President
State: NC District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	4

Transaction ID : F2CFD82AF78AA610452

Amount of Each Disbursement this Period

2	0	0	0	.	0	0
---	---	---	---	---	---	---

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

6	5	0	0	.	0	0
---	---	---	---	---	---	---

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

6	5	0	0	.	0	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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. Jim Renacci for Congress

Mailing Address 150 Smokerise Drive

City Wadsworth State OH Zip Code 44281-8701

Purpose of Disbursement
2014 General

011

Candidate Name

James B. Renacci

Category/
Type

Office Sought: House
 Senate
 President
State: OH District: 16

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : **FB5D9360D5D114D3000**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Kurt Schrader for Congress

Mailing Address PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement
2014 General

011

Candidate Name

Kurt Schrader

Category/
Type

Office Sought: House
 Senate
 President
State: OR District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : **B0E5C8779475092299F**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Mike Kelly for Congress

Mailing Address PO Box 476

City Lyndora State PA Zip Code 16045

Purpose of Disbursement
2014 General

011

Candidate Name

G. Mike J. Kelly

Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : **E12122AA5359429DCC4**

Amount of Each Disbursement this Period

2500.00

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

7000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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. Mike Thompson for Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
2014 General

011

Candidate Name

Michael C. Thompson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	4		

Transaction ID : 569204E3E52490A666C

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. National Republican Senatorial Committee

Mailing Address 425 Second Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
2014 Contribution

011

Candidate Name

National Republican Senatorial Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	4		

Transaction ID : 0B28350B597F410AA80

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Pat Meehan for Congress

Mailing Address 50 S. Providence Road

City Media State PA Zip Code 19063

Purpose of Disbursement
2014 General

011

Candidate Name

Patrick L. Meehan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	4		

Transaction ID : 1AD784889604D91A3C9

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

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

9	0	0	.	0	0
---	---	---	---	---	---

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

9	0	0	.	0	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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. Perlmutter for Congress

Mailing Address 3440 Youngfield Street
#264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Edwin G. Perlmutter

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 07

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : A8330EB38DA7A74C86F

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Price for Congress

Mailing Address PO Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Thomas E. Price M.D.

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 59DA59AC0DB66E311E8

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Synergy PAC

Mailing Address 6849 Old Dominion Drive
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Synergy PAC

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 299000C9F63EAC83A03

Amount of Each Disbursement this Period

5000.00

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

8500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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. Terri Sewell for Congress

Mailing Address PO Box 1964

City Birmingham State AL Zip Code 35201

Purpose of Disbursement
2014 General

011

Candidate Name

Terri A. Sewell

Category/
Type

Office Sought: House
 Senate
 President
State: AL District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : D5E20A7B4D0B5507C69

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Tim Scott for Senate

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407

Purpose of Disbursement
2014 Special General

011

Candidate Name

Timothy Eugene Scott

Category/
Type

Office Sought: House
 Senate
 President
State: SC District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : FEFC2005F62A5BB280B

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Welch for Congress

Mailing Address PO Box 1682

City Burlington State VT Zip Code 05402

Purpose of Disbursement
2014 General

011

Candidate Name

Peter F. Welch

Category/
Type

Office Sought: House
 Senate
 President
State: VT District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 02DF5E92252F229B5E

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

55500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

A. Aguilar Leadership Fund

Mailing Address PO Box 27424

City State Zip Code
Denver CO 80227

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

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 7513CFDEB726A529B77

Amount of Each Disbursement this Period

550.00

Full Name (Last, First, Middle Initial)

B. Colorado Leadership Fund, LLC

Mailing Address PO Box 238

City State Zip Code
Denver CO 80201

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

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : C10DB3ACC94CCF472F9

Amount of Each Disbursement this Period

5900.00

Full Name (Last, First, Middle Initial)

C. Pabon Leadership Fund

Mailing Address 3182 W 35th Ave

City State Zip Code
Denver CO 80211

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

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : A20FC6D98E822049130

Amount of Each Disbursement this Period

550.00

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

7000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

A. Priorities for Colorado

Mailing Address PO Box 372217

City State Zip Code
Denver CO 80237

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

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 53EB3B48842A90CD1E2

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Senate Majority Fund

Mailing Address 2318 Curtis Street

City State Zip Code
Denver CO 80205

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

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : 8013823678A50E9B2CF

Amount of Each Disbursement this Period

5900.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

6900.00

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

13900.00