



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Cigna Corporation Political Action Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="1432.53"/>	<input type="text" value="1432.53"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="39107.26"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="20857.42"/>	<input type="text" value="168832.15"/>
(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="59964.68"/>	<input type="text" value="170264.68"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="36250.00"/>	<input type="text" value="146550.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23714.68"/>	<input type="text" value="23714.68"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Signa Corporation Political Action Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11770.60	74246.05
(ii) Unitemized .....	9086.82	88586.10
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	20857.42	162832.15
(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) .....	20857.42	162832.15
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	6000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	20857.42	168832.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20857.42	168832.15

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	1600.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	1600.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28000.00	111000.00
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 .....	8250.00	33950.00
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)) ..	36250.00	146550.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36250.00	146550.00

**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) .....	20857.42	162832.15
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20857.42	162832.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	0.00	1600.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	1600.00

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

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

FOR LINE NUMBER: PAGE 6 OF 105  
(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. Anthony Abate**

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 Supply Chain Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-20093-20-23**

Amount of Each Receipt this Period  
 25.00

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

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 Supply Chain Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-20030-20-24**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 128 E 15th St

City State Zip Code  
 Ship Bottom NJ 08008-4467

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 ▼  
 538.60

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-12126-20-23**

Amount of Each Receipt this Period  
 26.93

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 76.93

**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 7 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Michael B. Alexander**  
 Mailing Address 128 E 15th St  
 City State Zip Code  
 Ship Bottom NJ 08008-4467  
 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 ▼  
 538.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-12096-20-24**  
 Amount of Each Receipt this Period  
 26.93

Full Name (Last, First, Middle Initial)  
**B. Ann H. Asbaty**  
 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 General Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 600.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-339-20-23**  
 Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. Ann H. Asbaty**  
 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 General Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 600.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-338-20-24**  
 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: (check only one)	PAGE 8 OF 105
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. James Austin</b>			Date of Receipt										
Mailing Address 394 W Remington Dr			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>/</td> <td>13</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	13	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y									
09	/	13	/	2012									
City Chandler	State AZ	Zip Code 85286-7642	<b>Transaction ID : 20120910-5443-20-23</b>										
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period										
Name of Employer Cigna HEALTHCARE OF AZ, INC			46.74										
Occupation Medical Director													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼												
			933.49										

Full Name (Last, First, Middle Initial) <b>B. James Austin</b>			Date of Receipt										
Mailing Address 394 W Remington Dr			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>/</td> <td>27</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	27	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y									
09	/	27	/	2012									
City Chandler	State AZ	Zip Code 85286-7642	<b>Transaction ID : 20120924-5435-20-24</b>										
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period										
Name of Employer Cigna HEALTHCARE OF AZ, INC			46.74										
Occupation Medical Director													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼												
			933.49										

Full Name (Last, First, Middle Initial) <b>C. Sanjiv Awasthi</b>			Date of Receipt										
Mailing Address 900 Cottage Grove Rd			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>/</td> <td>13</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	13	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y									
09	/	13	/	2012									
City Hartford	State CT	Zip Code 06152-0001	<b>Transaction ID : 20120910-23779-20-23</b>										
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period										
Name of Employer Cigna Corp.			15.00										
Occupation Corporate Services Director													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼												
			300.00										

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	108.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-23695-20-24**  
 Amount of Each Receipt this Period 15.00

**B. 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 ▼ 550.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-2246-20-23**  
 Amount of Each Receipt this Period 50.00

**C. Jeff Berardo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Director-Direct Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-2240-20-24**  
 Amount of Each Receipt this Period 50.00

**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: PAGE 11 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. 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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-1906-20-24**  
 Amount of Each Receipt this Period  
**19.25**

**B. Mark L. Boxer**  
 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 EVP CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1728.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-9904-20-23**  
 Amount of Each Receipt this Period  
**192.00**

**C. Mark L. Boxer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City 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 EVP CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1728.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-9881-20-24**  
 Amount of Each Receipt this Period  
**192.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **403.25**  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation SVP Service Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2016.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-13788-20-23**

Amount of Each Receipt this Period  
 96.00

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation SVP Service Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2016.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-13755-20-24**

Amount of Each Receipt this Period  
 192.00

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

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.03

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-2742-20-23**

Amount of Each Receipt this Period  
 17.11

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	305.11
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 105
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **336.03**

Date of Receipt **09 / 27 / 2012**  
**Transaction ID : 20120924-2735-20-24**

Amount of Each Receipt this Period **17.11**

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

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **277.21**

Date of Receipt **09 / 13 / 2012**  
**Transaction ID : 20120910-4582-20-23**

Amount of Each Receipt this Period **9.67**

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

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **277.21**

Date of Receipt **09 / 27 / 2012**  
**Transaction ID : 20120924-4573-20-24**

Amount of Each Receipt this Period **11.23**

**SUBTOTAL** of Receipts This Page (optional)..... **38.01**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Timothy D. Buckley</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 <b>Transaction ID : 20120910-13532-20-23</b>
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		Aggregate Year-to-Date ▼ 664.00
Name of Employer Cigna Internation	Occupation VP Treasury	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Timothy D. Buckley</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-13502-20-24</b>
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		Aggregate Year-to-Date ▼ 664.00
Name of Employer Cigna Internation	Occupation VP Treasury	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mark Butler</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 <b>Transaction ID : 20120910-9499-20-23</b>
Mailing Address 2223 Washington St		Amount of Each Receipt this Period 25.00
City Newton	State MA Zip Code 02462-1417	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

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

FOR LINE NUMBER: PAGE 15 OF 105  
(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 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 / 27 / 2012  
**Transaction ID : 20120924-9475-20-24**

Amount of Each Receipt this Period  
 25.00

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

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 / 13 / 2012  
**Transaction ID : 20120910-5682-20-23**

Amount of Each Receipt this Period  
 15.00

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

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 / 27 / 2012  
**Transaction ID : 20120924-5674-20-24**

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 16 OF 105  
(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. William C. Carlson**  
 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 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 / 13 / 2012  
**Transaction ID : 20120910-737-20-23**  
 Amount of Each Receipt this Period  
 25.00

**B. William C. Carlson**  
 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 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 / 27 / 2012  
**Transaction ID : 20120924-734-20-24**  
 Amount of Each Receipt this Period  
 25.00

**c. Charles R. Catalano**  
 Full Name (Last, First, Middle Initial)  
 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 General Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-1796-20-23**  
 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 17 OF 105
	<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. Charles R. Catalano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-1793-20-24**  
 Amount of Each Receipt this Period  
 25.00

**B. Michelle L. Cavner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25600 N Norterra Dr Bldg B  
 City Phoenix State AZ Zip Code 85085-8201  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-6018-20-24**  
 Amount of Each Receipt this Period  
 50.00

**C. Leslie A. Charles**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Two Securities Centre  
 City Atlanta State GA Zip Code 30305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation Financial Analysis Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-17213-20-23**  
 Amount of Each Receipt this Period  
 12.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 87.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 105
	<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. Leslie A. Charles**  
Full Name (Last, First, Middle Initial)

Mailing Address Two Securities Centre

City Atlanta State GA Zip Code 30305

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

Name of Employer Cigna Corp. Occupation Financial Analysis Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-17160-20-24**

Amount of Each Receipt this Period  
**12.00**

**B. 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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-397-20-23**

Amount of Each Receipt this Period  
**90.00**

**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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-396-20-24**

Amount of Each Receipt this Period  
**90.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **192.00**

**TOTAL** This Period (last page this line 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 105
	<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. Gina L. Collins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Business Project Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-11402-20-23**  
 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 Business Project Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-11375-20-24**  
 Amount of Each Receipt this Period  
 20.00

**C. Michael Conrad**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 N Brand Blvd  
 City Glendale State CA Zip Code 91203-2311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager-National Accts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2174.23

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-2330-20-23**  
 Amount of Each Receipt this Period  
 475.42

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	515.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Michael Conrad</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2012 <b>Transaction ID : 20120924-2324-20-24</b>
Mailing Address 400 N Brand Blvd		Amount of Each Receipt this Period 9.67
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 ▼ 2174.23	

Full Name (Last, First, Middle Initial) <b>B. David M. Cordani</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2012 <b>Transaction ID : 20120910-480-20-23</b>
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		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation President and CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3433.00	

Full Name (Last, First, Middle Initial) <b>C. David M. Cordani</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2012 <b>Transaction ID : 20120924-479-20-24</b>
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		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation President and CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3433.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	393.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 21 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Henri R. Courmand**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5310 E High St  
 City Phoenix State AZ Zip Code 85054-5469  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Strat And Bus Develop Sr Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-6908-20-23**  
 Amount of Each Receipt this Period 20.00

**B. Henri R. Courmand**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5310 E High St  
 City Phoenix State AZ Zip Code 85054-5469  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Strat And Bus Develop Sr Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-6898-20-24**  
 Amount of Each Receipt this Period 20.00

**C. Stephen W. Crawford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 216 B Ave  
 City Coronado State CA Zip Code 92118-1955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation Medical Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-13297-20-23**  
 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 22 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

Mailing Address 216 B Ave

City Coronado State CA Zip Code 92118-1955

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

Name of Employer Cigna Corp. Occupation Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : 20120924-13268-20-24**

Amount of Each Receipt this Period  
**19.25**

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

Mailing Address 2701 N Rocky Point Dr

City Tampa State FL Zip Code 33607-5917

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2012**

**Transaction ID : 20120910-8496-20-23**

Amount of Each Receipt this Period  
**100.00**

**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 ▼ **650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : 20120924-8478-20-24**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>219.25</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. 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 / 13 / 2012  
**Transaction ID : 20120910-10291-20-23**

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 / 27 / 2012  
**Transaction ID : 20120924-10266-20-24**

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 601 Pennsylvania Ave NW

City State Zip Code  
 Washington DC 20004-2601

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

Name of Employer Occupation  
 Cigna Corp. Government Affairs Director

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-2529-20-23**

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 24 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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 ▼ **470.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : 20120924-2523-20-24**

Amount of Each Receipt this Period  
**25.00**

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

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 / 13 / 2012**

**Transaction ID : 20120910-242-20-23**

Amount of Each Receipt this Period  
**25.00**

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

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 / 27 / 2012**

**Transaction ID : 20120924-242-20-24**

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 25 OF 105  
(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 R. DeFeo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 Deverell Dr  
 City North Barrington State IL Zip Code 60010-6924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation VP Information Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-21390-20-23**  
 Amount of Each Receipt this Period  
 50.00

**B. John R. DeFeo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 Deverell Dr  
 City North Barrington State IL Zip Code 60010-6924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation VP Information Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-21321-20-24**  
 Amount of Each Receipt this Period  
 50.00

**C. Edwin J. Detrick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City Philadelphia State PA Zip Code 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation VP Investor Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-2619-20-23**  
 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 26 OF 105  
(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. Edwin J. Detrick**

Mailing Address 1601 Chestnut St  
 # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Investor Relations

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-2612-20-24**

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 5310 E High St

City Phoenix State AZ Zip Code 85054-5469

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 463.64

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-30-20-23**

Amount of Each Receipt this Period  
 6.31

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

Mailing Address 5310 E High St

City Phoenix State AZ Zip Code 85054-5469

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 463.64

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-30-20-24**

Amount of Each Receipt this Period  
 6.31

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32.62

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 105
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Scott E. Doyle</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 <b>Transaction ID : 20120910-10173-20-23</b>
Mailing Address 1640 Dallas Pkwy		Amount of Each Receipt this Period 15.00
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 Fraud Manager	
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>B. Scott E. Doyle</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-10150-20-24</b>
Mailing Address 1640 Dallas Pkwy		Amount of Each Receipt this Period 15.00
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 Fraud Manager	
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>C. Beverly J. Everett</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 <b>Transaction ID : 20120910-110-20-23</b>
Mailing Address 8228 Academy Rd		Amount of Each Receipt this Period 20.00
City Ellicott City	State MD	Zip Code 21043-5519
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 105
	<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. Beverly J. Everett**  
Full Name (Last, First, Middle Initial)

Mailing Address 8228 Academy Rd

City Ellicott City State MD Zip Code 21043-5519

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-110-20-24**

Amount of Each Receipt this Period 20.00

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Account Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-12233-20-23**

Amount of Each Receipt this Period 19.25

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Account Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-12203-20-24**

Amount of Each Receipt this Period 19.25

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 58.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Staci F. Fernandez**  
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 ▼ 400.00

Date of Receipt  
09 / 13 / 2012  
**Transaction ID : 20120910-1971-20-23**

Amount of Each Receipt this Period  
20.00

**B. Staci F. Fernandez**  
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 ▼ 400.00

Date of Receipt  
09 / 27 / 2012  
**Transaction ID : 20120924-1967-20-24**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
09 / 13 / 2012  
**Transaction ID : 20120910-252-20-23**

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

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

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt **09 / 27 / 2012**  
**Transaction ID : 20120924-252-20-24**

Amount of Each Receipt this Period **25.00**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Chief Communic Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **09 / 13 / 2012**  
**Transaction ID : 20120910-21123-20-23**

Amount of Each Receipt this Period **100.00**

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Chief Communic Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **09 / 27 / 2012**  
**Transaction ID : 20120924-21054-20-24**

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 31 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 525 W Monroe St

City Chicago      State IL      Zip Code 60661-3629

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt  
**09 / 13 / 2012**  
**Transaction ID : 20120910-2944-20-23**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 525 W Monroe St

City Chicago      State IL      Zip Code 60661-3629

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt  
**09 / 27 / 2012**  
**Transaction ID : 20120924-2936-20-24**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 2220 Millbrook Dr

City Aurora      State IL      Zip Code 60502-6953

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **257.66**

Date of Receipt  
**09 / 13 / 2012**  
**Transaction ID : 20120910-6546-20-23**

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

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

**A. Susan E. Gaca**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2220 Millbrook Dr  
 City Aurora State IL Zip Code 60502-6953  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 257.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-6536-20-24**  
 Amount of Each Receipt this Period  
 25.00

**B. Thomas Garvey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-2106-20-23**  
 Amount of Each Receipt this Period  
 19.25

**C. Thomas Garvey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-2101-20-24**  
 Amount of Each Receipt this Period  
 19.25

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 63.50  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. David 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 ▼ **538.18**

Date of Receipt **09 / 13 / 2012**  
**Transaction ID : 20120910-4111-20-23**

Amount of Each Receipt this Period **6.79**

**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 ▼ **538.18**

Date of Receipt **09 / 27 / 2012**  
**Transaction ID : 20120924-4103-20-24**

Amount of Each Receipt this Period **18.52**

**C. Paul J. Gontarek**  
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 Assoc Chief Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **940.00**

Date of Receipt **09 / 13 / 2012**  
**Transaction ID : 20120910-3059-20-23**

Amount of Each Receipt this Period **75.00**

**SUBTOTAL** of Receipts This Page (optional).....▶ **100.31**

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

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

**A. Paul J. Gontarek**  
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 Assoc Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **940.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : 20120924-3051-20-24**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address 49 Briarwood Dr

City Old Saybrook State CT Zip Code 06475-2007

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.07**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 13 / 2012**

**Transaction ID : 20120910-227-20-23**

Amount of Each Receipt this Period  
**9.62**

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

Mailing Address 49 Briarwood Dr

City Old Saybrook State CT Zip Code 06475-2007

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.07**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : 20120924-227-20-24**

Amount of Each Receipt this Period  
**9.62**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>94.24</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 35 OF 105  
(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 Gray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. Strat And Bus Develop Sr Dir  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-2026-20-23**  
 Amount of Each Receipt this Period  
 25.00

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-2022-20-24**  
 Amount of Each Receipt this Period  
 25.00

**C. David D. Guilmette**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 E 45th St  
 City State Zip Code  
 New York NY 10017-3144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cigna Corp. President Global Employer Sgmt  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2136.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-19821-20-23**  
 Amount of Each Receipt this Period  
 192.00

**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: PAGE 36 OF 105  
(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 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 President Global Employer Sgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2136.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-19758-20-24**  
 Amount of Each Receipt this Period  
 192.00

**B. Douglas R. Hadley**  
 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 INT'L REHAB. ASSOCIATES, INC. Occupation Medical Officer  
 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 / 13 / 2012  
**Transaction ID : 20120910-6431-20-23**  
 Amount of Each Receipt this Period  
 25.00

**C. Douglas R. Hadley**  
 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 INT'L REHAB. ASSOCIATES, INC. Occupation Medical Officer  
 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 / 27 / 2012  
**Transaction ID : 20120924-6422-20-24**  
 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 37 OF 105
	<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. 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 / 13 / 2012  
**Transaction ID : 20120910-5285-20-23**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 901 E Cary St

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-5277-20-24**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 1640 Dallas Pkwy

City Plano	State TX	Zip Code 75093-4515
---------------	-------------	------------------------

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

Name of Employer Cigna DENTAL HEALTH, INC.	Occupation Dentist
---	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.53

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-6414-20-23**

Amount of Each Receipt this Period  
13.55

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	53.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 105
	<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. Clay R. Hedlund**

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  
Cigna DENTAL HEALTH, INC. Dentist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.53

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-6405-20-24**

Amount of Each Receipt this Period  
13.55

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

Mailing Address 1 Cigna Dr

City State Zip Code  
Bourbonnais IL 60914-4475

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

Name of Employer Occupation  
Cigna Corp. Operations Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-12901-20-23**

Amount of Each Receipt this Period  
19.25

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

Mailing Address 1 Cigna Dr

City State Zip Code  
Bourbonnais IL 60914-4475

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

Name of Employer Occupation  
Cigna Corp. Operations Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-12872-20-24**

Amount of Each Receipt this Period  
19.25

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	52.05
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 39 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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  
 09 / 13 / 2012  
**Transaction ID : 20120910-801-20-23**

Amount of Each Receipt this Period  
 19.24

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

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  
 09 / 27 / 2012  
**Transaction ID : 20120924-798-20-24**

Amount of Each Receipt this Period  
 19.24

Full Name (Last, First, Middle Initial)  
**C. Tamara Horwitz**

Mailing Address 3430 List Pl

City State Zip Code  
 Minneapolis MN 55416-4559

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

Name of Employer Occupation  
 Cigna Corp. Business Project Sr Spec

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 425.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-17409-20-23**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 63.48

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Tamara Horwitz**

Mailing Address 3430 List Pl

City State Zip Code  
Minneapolis MN 55416-4559

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

Name of Employer Occupation  
Cigna Corp. Business Project Sr Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2012  
**Transaction ID : 20120924-17356-20-24**

Amount of Each Receipt this Period  
25.00

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

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 Database Administrator Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.53

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 13 / 2012  
**Transaction ID : 20120910-2143-20-23**

Amount of Each Receipt this Period  
12.29

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

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 Database Administrator Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.53

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2012  
**Transaction ID : 20120924-2138-20-24**

Amount of Each Receipt this Period  
12.29

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 49.58

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

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

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

FOR LINE NUMBER: PAGE 41 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-1823-20-23**

Amount of Each Receipt this Period  
 19.25

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

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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-1820-20-24**

Amount of Each Receipt this Period  
 19.25

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

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

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

Name of Employer Occupation  
 LIFE INS. CO. OF NORTH AMERICA Underwriting 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 / 13 / 2012  
**Transaction ID : 20120910-129-20-23**

Amount of Each Receipt this Period  
 26.93

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 65.43

**TOTAL** This Period (last page this line number 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 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 1601 Chestnut St  
 # 2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 538.60

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-129-20-24**

Amount of Each Receipt this Period  
 26.93

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

Mailing Address 400 N Brand Blvd

City Glendale State CA Zip Code 91203-2311

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-6577-20-23**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 400 N Brand Blvd

City Glendale State CA Zip Code 91203-2311

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-6567-20-24**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 76.93

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

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

**A. Nicole S. Jones**  
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 EVP Genl Counsel & Pub Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3840.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-13349-20-23**

Amount of Each Receipt this Period 192.00

**B. Nicole S. Jones**  
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 EVP Genl Counsel & Pub Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3840.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-13320-20-24**

Amount of Each Receipt this Period 192.00

**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 ▼ 550.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-7139-20-23**

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: PAGE 44 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. 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 ▼ **550.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : 20120924-7128-20-24**

Amount of Each Receipt this Period  
**50.00**

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

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 M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2012**

**Transaction ID : 20120910-1799-20-23**

Amount of Each Receipt this Period  
**12.00**

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

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 M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : 20120924-1796-20-24**

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 45 OF 105
	<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. Benjamin W. Katz**

Mailing Address 1 Front St

City San Francisco State CA Zip Code 94111-5325

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 13 / 2012**

**Transaction ID : 20120910-6728-20-23**

Amount of Each Receipt this Period **50.00**

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

Mailing Address 1 Front St

City San Francisco State CA Zip Code 94111-5325

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 27 / 2012**

**Transaction ID : 20120924-6718-20-24**

Amount of Each Receipt this Period **50.00**

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

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation HR Operations Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **09 / 13 / 2012**

**Transaction ID : 20120910-11916-20-23**

Amount of Each Receipt this Period **15.00**

**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 46 OF 105
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. John M. Kissel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City Philadelphia State PA Zip Code 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation HR Operations Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-11886-20-24**  
 Amount of Each Receipt this Period 15.00

**B. 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 ▼ 300.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-22798-20-23**  
 Amount of Each Receipt this Period 75.00

**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 ▼ 300.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-22719-20-24**  
 Amount of Each Receipt this Period 75.00

**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: PAGE 47 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Operations Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 291.94

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-951-20-23**

Amount of Each Receipt this Period  
 14.81

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Operations Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 291.94

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-948-20-24**

Amount of Each Receipt this Period  
 14.81

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Assoc Chief Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-1396-20-23**

Amount of Each Receipt this Period  
 50.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 105
	<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. 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 ▼ 475.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-1393-20-24**  
 Amount of Each Receipt this Period 50.00

**B. F. Lastner**  
 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 ▼ 553.92

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-13616-20-23**  
 Amount of Each Receipt this Period 100.00

**C. F. Lastner**  
 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 ▼ 553.92

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-13585-20-24**  
 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 49 OF 105  
(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. Lisa Lawrence**

Mailing Address 2701 N Rocky Point Dr

City Tampa State FL Zip Code 33607-5917

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.85**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2012**

**Transaction ID : 20120910-3423-20-23**

Amount of Each Receipt this Period  
**15.48**

Full Name (Last, First, Middle Initial)  
**B. Lisa Lawrence**

Mailing Address 2701 N Rocky Point Dr

City Tampa State FL Zip Code 33607-5917

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.85**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : 20120924-3415-20-24**

Amount of Each Receipt this Period  
**15.48**

Full Name (Last, First, Middle Initial)  
**C. Jon E. Maesner**

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  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2012**

**Transaction ID : 20120910-6437-20-23**

Amount of Each Receipt this Period  
**15.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **45.96**

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

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

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

FOR LINE NUMBER: PAGE 50 OF 105  
(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. Jon E. Maesner**  
 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 Clinical Program Sr Dir  
 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 / 27 / 2012  
**Transaction ID : 20120924-6428-20-24**  
 Amount of Each Receipt this Period  
 15.00

**B. William J. Maher**  
 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 Financial Analysis Manager  
 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 / 13 / 2012  
**Transaction ID : 20120910-3379-20-23**  
 Amount of Each Receipt this Period  
 12.00

**C. William J. Maher**  
 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 Financial Analysis Manager  
 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 / 27 / 2012  
**Transaction ID : 20120924-3371-20-24**  
 Amount of Each Receipt this Period  
 12.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 39.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 51 OF 105  
(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 Regional & Operations

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2890.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-2174-20-23**

Amount of Each Receipt this Period  
 192.00

Full Name (Last, First, Middle Initial)  
**B. 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 Regional & Operations

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2890.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-2169-20-24**

Amount of Each Receipt this Period  
 192.00

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 Sr Dir

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-273-20-23**

Amount of Each Receipt this Period  
 19.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 403.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Carla C. Mangiafico</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-273-20-24</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 19.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 380.00
FEC ID number of contributing federal political committee. C	Occupation Financial Analysis Sr Dir	
Name of Employer CT GENERAL LIFE INSURANCE CO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mark P. Marsters</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 <b>Transaction ID : 20120910-10486-20-23</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 75.00
City Philadelphia	State PA	
Zip Code 19192-0002		Aggregate Year-to-Date ▼ 1050.00
FEC ID number of contributing federal political committee. C	Occupation VP Service Operations	
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mark P. Marsters</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-10461-20-24</b>
Mailing Address 1601 Chestnut St # 2		Amount of Each Receipt this Period 75.00
City Philadelphia	State PA	
Zip Code 19192-0002		Aggregate Year-to-Date ▼ 1050.00
FEC ID number of contributing federal political committee. C	Occupation VP Service Operations	
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	169.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 53 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Thomas 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 ▼  
 550.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-10168-20-23**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**B. 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 ▼  
 550.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-10145-20-24**

Amount of Each Receipt this Period  
 50.00

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

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 Finance

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-9728-20-23**

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 54 OF 105
	<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 VP Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 27 / 2012  
**Transaction ID : 20120924-9703-20-24**

Amount of Each Receipt this Period  
50.00

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  
09 / 13 / 2012  
**Transaction ID : 20120910-10543-20-23**

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  
09 / 27 / 2012  
**Transaction ID : 20120924-10518-20-24**

Amount of Each Receipt this Period  
15.00

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

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

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

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

FOR LINE NUMBER: PAGE 55 OF 105  
(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. Morris D. Mirabella**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2701 N Rocky Point Dr  
 City Tampa State FL Zip Code 33607-5917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-6893-20-23**  
 Amount of Each Receipt this Period  
 15.00

**B. Morris D. Mirabella**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2701 N Rocky Point Dr  
 City Tampa State FL Zip Code 33607-5917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-6883-20-24**  
 Amount of Each Receipt this Period  
 15.00

**C. Kymberly P. Miranda**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 520 SE 5th Ave  
 City Fort Lauderdale State FL Zip Code 33301-2932  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Account Manager-National Accts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-4711-20-23**  
 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: (check only one)	PAGE 56 OF 105
	<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) <b>A. Kymberly P. Miranda</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-4702-20-24</b>
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>B. Jodie K. Mirfendereski</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 <b>Transaction ID : 20120910-4022-20-23</b>
Mailing Address 104 Glenlivet Pl		Amount of Each Receipt this Period 12.38
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 ▼ 244.77	

Full Name (Last, First, Middle Initial) <b>C. Jodie K. Mirfendereski</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-4014-20-24</b>
Mailing Address 104 Glenlivet Pl		Amount of Each Receipt this Period 12.38
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 ▼ 244.77	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	44.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 57 OF 105  
(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. Alan M. Muney**

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 Off

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 875.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-19907-20-23**

Amount of Each Receipt this Period  
 175.00

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

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 Off

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 875.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-19843-20-24**

Amount of Each Receipt this Period  
 175.00

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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-10792-20-23**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**TOTAL** This Period (last page this line 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 105
	<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. John M. Murabito**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City Philadelphia State PA Zip Code 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corp. Occupation EVP Human Resources & Services  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-10767-20-24**  
 Amount of Each Receipt this Period  
**100.00**

**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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-8452-20-23**  
 Amount of Each Receipt this Period  
**12.00**

**C. 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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-8434-20-24**  
 Amount of Each Receipt this Period  
**12.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Paula Murphy**  
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 IT Senior Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
490.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 13 / 2012  
**Transaction ID : 20120910-4676-20-23**

Amount of Each Receipt this Period  
35.00

**B. Paula Murphy**  
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 IT Senior Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
490.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2012  
**Transaction ID : 20120924-4667-20-24**

Amount of Each Receipt this Period  
35.00

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

Mailing Address 3 Summit Park Dr

City State Zip Code  
Independence OH 44131-2599

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
565.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 13 / 2012  
**Transaction ID : 20120910-7385-20-23**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00

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

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

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

FOR LINE NUMBER: PAGE 60 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Noreen Nageotte**  
 Mailing Address 3 Summit Park Dr  
 City State Zip Code  
 Independence OH 44131-2599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Provider Contracting Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 565.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-7371-20-24**  
 Amount of Each Receipt this Period  
 75.00

Full Name (Last, First, Middle Initial)  
**B. Ralph J. Nicoletti**  
 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. EVP CFO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1920.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-23121-20-23**  
 Amount of Each Receipt this Period  
 192.00

Full Name (Last, First, Middle Initial)  
**C. Ralph J. Nicoletti**  
 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. EVP CFO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1920.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-23039-20-24**  
 Amount of Each Receipt this Period  
 192.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 459.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 61 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Daniel Nicoll**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Medical Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 538.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-2068-20-23**  
 Amount of Each Receipt this Period  
 26.93

**B. Daniel Nicoll**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 Washington Blvd  
 City Jersey City State NJ Zip Code 07310-1995  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Medical Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 538.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-2064-20-24**  
 Amount of Each Receipt this Period  
 26.93

**C. Eliana Nunez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operating Effectiveness Sr Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 539.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-1245-20-23**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 103.86  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. Eliana Nunez</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-1242-20-24</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 50.00
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operating Effectiveness Sr Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 539.84	

Full Name (Last, First, Middle Initial) <b>B. Kathleen M. O'Neil</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 <b>Transaction ID : 20120910-1719-20-23</b>
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 Cigna Corp.	Occupation Business Project 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>C. Kathleen M. O'Neil</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-1716-20-24</b>
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 Cigna Corp.	Occupation Business Project Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 63 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 11712 Emerald Falls Dr

City State Zip Code  
 Austin TX 78738-5329

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

Name of Employer Occupation  
 Cigna Corp. Compliance Sr Dir

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 923.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-13269-20-23**

Amount of Each Receipt this Period  
 46.15

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

Mailing Address 11712 Emerald Falls Dr

City State Zip Code  
 Austin TX 78738-5329

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

Name of Employer Occupation  
 Cigna Corp. Compliance Sr Dir

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 923.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-13240-20-24**

Amount of Each Receipt this Period  
 46.15

Full Name (Last, First, Middle Initial)  
**C. Eric P. Palmer**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Business Financial Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-5997-20-23**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 117.30

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. 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 ▼ **500.00**

Date of Receipt **09 / 27 / 2012**

**Transaction ID : 20120924-5989-20-24**

Amount of Each Receipt this Period **25.00**

**B. Jeffery P. Panter**  
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 Claims Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **09 / 13 / 2012**

**Transaction ID : 20120910-4962-20-23**

Amount of Each Receipt this Period **19.25**

**C. Jeffery P. Panter**  
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 Claims Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **09 / 27 / 2012**

**Transaction ID : 20120924-4953-20-24**

Amount of Each Receipt this Period **19.25**

**SUBTOTAL** of Receipts This Page (optional)..... **63.50**

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



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

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

FOR LINE NUMBER: PAGE 66 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Mark A. Parsons**  
 Mailing Address 900 Cottage Grove Rd  
 City State Zip Code  
 Hartford CT 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO SVP Reinsurance  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-466-20-24**  
 Amount of Each Receipt this Period  
 40.00

Full Name (Last, First, Middle Initial)  
**B. Robert D. Picinich**  
 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 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 / 13 / 2012  
**Transaction ID : 20120910-2165-20-23**  
 Amount of Each Receipt this Period  
 15.00

Full Name (Last, First, Middle Initial)  
**C. Robert D. Picinich**  
 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 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 / 27 / 2012  
**Transaction ID : 20120924-2160-20-24**  
 Amount of Each Receipt this Period  
 15.00

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

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

**A. Charles C. Pitts**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11016 Rushmore Dr  
City Charlotte State NC Zip Code 28277-3474  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cigna Corp. Occupation General Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 384.60

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-13495-20-23**  
Amount of Each Receipt this Period 19.23

**B. Charles C. Pitts**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11016 Rushmore Dr  
City Charlotte State NC Zip Code 28277-3474  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cigna Corp. Occupation General Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 384.60

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-13465-20-24**  
Amount of Each Receipt this Period 19.23

**C. Sue Podbielski**  
Full Name (Last, First, Middle Initial)  
Mailing Address 525 W Monroe St  
City Chicago State IL Zip Code 60661-3629  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cigna Corporation Occupation General Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-14911-20-23**  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 88.46  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 68 OF 105  
(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. Sue Podbielski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 525 W Monroe St  
 City Chicago State IL Zip Code 60661-3629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cigna Corporation Occupation 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 / 27 / 2012  
**Transaction ID : 20120924-14870-20-24**  
 Amount of Each Receipt this Period  
 50.00

**B. 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 ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-1345-20-23**  
 Amount of Each Receipt this Period  
 30.00

**C. 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 ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-1342-20-24**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 105
	<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 F. Prevost**  
Full Name (Last, First, Middle Initial)

Mailing Address Bradley Airport Hangar 85-176

City Windsor Locks State CT Zip Code 06096

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Aviation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**09 / 13 / 2012**

**Transaction ID : 20120910-340-23**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address Bradley Airport Hangar 85-176

City Windsor Locks State CT Zip Code 06096

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Aviation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**09 / 27 / 2012**

**Transaction ID : 20120924-339-20-24**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 3200 Park Lane Dr

City Pittsburgh State PA Zip Code 15275-1117

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

Name of Employer Cigna Corporation Occupation Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
**09 / 27 / 2012**

**Transaction ID : 20120924-12517-20-24**

Amount of Each Receipt this Period  
**40.00**

**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 70 OF 105
	<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 J. Raybeck**  
Full Name (Last, First, Middle Initial)

Mailing Address 401 Chestnut St

City Chattanooga State TN Zip Code 37402-4924

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **09 / 13 / 2012**  
**Transaction ID : 20120910-11121-20-23**

Amount of Each Receipt this Period **19.25**

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

Mailing Address 401 Chestnut St

City Chattanooga State TN Zip Code 37402-4924

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **09 / 27 / 2012**  
**Transaction ID : 20120924-11095-20-24**

Amount of Each Receipt this Period **19.25**

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

Mailing Address Stapley Corporate Center

City Mesa State AZ Zip Code 85204

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

Name of Employer Cigna HEALTHCARE OF AZ, INC Occupation Urgent Care Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **09 / 13 / 2012**  
**Transaction ID : 20120910-5927-20-23**

Amount of Each Receipt this Period **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **58.50**

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

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

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

FOR LINE NUMBER: PAGE 71 OF 105  
(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 **Mesa**      State **AZ**      Zip Code **85204**

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

Name of Employer **Cigna HEALTHCARE OF AZ, INC**      Occupation **Urgent Care Physician**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 27 / 2012**  
**Transaction ID : 20120924-5919-20-24**

Amount of Each Receipt this Period  
**20.00**

Full Name (Last, First, Middle Initial)  
**B. 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 / 13 / 2012**  
**Transaction ID : 20120910-4210-20-23**

Amount of Each Receipt this Period  
**15.00**

Full Name (Last, First, Middle Initial)  
**C. 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 / 27 / 2012**  
**Transaction ID : 20120924-4201-20-24**

Amount of Each Receipt this Period  
**15.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **50.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Thomas B. Richards**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Segment Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-666-20-23**  
 Amount of Each Receipt this Period 25.00

**B. Thomas B. Richards**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Segment Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-664-20-24**  
 Amount of Each Receipt this Period 25.00

**c. 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 BFO International  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-22544-20-23**  
 Amount of Each Receipt this Period 100.00

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

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

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

FOR LINE NUMBER: PAGE 73 OF 105  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)  
**A. Jeffrey T. Rigg**

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 BFO International

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
09 / 27 / 2012  
**Transaction ID : 20120924-22468-20-24**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. 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 ▼  
675.00

Date of Receipt  
09 / 13 / 2012  
**Transaction ID : 20120910-2137-20-23**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. 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 ▼  
675.00

Date of Receipt  
09 / 27 / 2012  
**Transaction ID : 20120924-2132-20-24**

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: PAGE 74 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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

Mailing Address 1601 Chestnut St  
 # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Occupation  
 LIFE INS. CO. OF NORTH AMERICA VP General Manager Intl

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1920.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-9747-20-23**

Amount of Each Receipt this Period  
 96.00

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

Mailing Address 1601 Chestnut St  
 # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Occupation  
 LIFE INS. CO. OF NORTH AMERICA VP General Manager Intl

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1920.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-9722-20-24**

Amount of Each Receipt this Period  
 96.00

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

Mailing Address 900 Cottage Grove Rd

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Medical Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-1975-20-23**

Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.00

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

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

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

FOR LINE NUMBER: PAGE 75 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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 Medical Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-1971-20-24**

Amount of Each Receipt this Period  
 30.00

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

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 Sr Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 580.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-408-20-23**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**c. David N. Sasportas**

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 Sr Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 580.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-407-20-24**

Amount of Each Receipt this Period  
 50.00

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

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

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

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

FOR LINE NUMBER: PAGE 76 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Frank Sataline**

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 Chief Investment Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1700.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-468-20-23**

Amount of Each Receipt this Period  
 85.00

Full Name (Last, First, Middle Initial)  
**B. Frank Sataline**

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 Chief Investment Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1700.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-467-20-24**

Amount of Each Receipt this Period  
 85.00

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

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. Strategic Sourcing Sr Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-630-20-23**

Amount of Each Receipt this Period  
 25.00

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

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

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

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

FOR LINE NUMBER: PAGE 77 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. David A. Savino**  
 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. Strategic Sourcing 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 / 27 / 2012  
**Transaction ID : 20120924-629-20-24**  
 Amount of Each Receipt this Period  
 25.00

**B. David S. Scheibe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City State Zip Code  
 Philadelphia PA 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LIFE INS. CO. OF NORTH AMERICA Treasury 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 / 13 / 2012  
**Transaction ID : 20120910-1425-20-23**  
 Amount of Each Receipt this Period  
 20.00

**c. David S. Scheibe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Chestnut St # 2  
 City State Zip Code  
 Philadelphia PA 19192-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LIFE INS. CO. OF NORTH AMERICA Treasury 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 / 27 / 2012  
**Transaction ID : 20120924-1422-20-24**  
 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:	PAGE 78 OF 105
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 3900 E Mexico Ave  
Ste 1100

City State Zip Code  
Denver CO 80210-3946

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

Name of Employer Occupation  
Cigna Corp. Sales Director-Direct Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 13 / 2012  
**Transaction ID : 20120910-14222-20-23**

Amount of Each Receipt this Period  
19.25

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

Mailing Address 3900 E Mexico Ave  
Ste 1100

City State Zip Code  
Denver CO 80210-3946

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

Name of Employer Occupation  
Cigna Corp. Sales Director-Direct Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2012  
**Transaction ID : 20120924-14186-20-24**

Amount of Each Receipt this Period  
19.25

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

Mailing Address 25600 N Norterra Dr  
Bldg A

City State Zip Code  
Phoenix AZ 85085-8201

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

Name of Employer Occupation  
Cigna HEALTHCARE OF AZ, INC Operations Senior 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 / 13 / 2012  
**Transaction ID : 20120910-3740-20-23**

Amount of Each Receipt this Period  
19.25

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 57.75

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 OF 105
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. Kenneth 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 / 13 / 2012  
**Transaction ID : 20120910-10819-20-23**

Amount of Each Receipt this Period  
 19.25

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

Mailing Address 7555 Goodwin Rd

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

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

Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation HR Director
--	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-10794-20-24**

Amount of Each Receipt this Period  
 19.25

**c. Marjorie G. Stein**  
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 Employee Relations 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 / 13 / 2012  
**Transaction ID : 20120910-2061-20-23**

Amount of Each Receipt this Period  
 12.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 81 OF 105  
(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. Marjorie G. Stein**

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 Employee Relations Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-2057-20-24**

Amount of Each Receipt this Period  
 12.00

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

Mailing Address One Penn Mark Plaza

City Carmel State IN Zip Code 46032

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 721.30

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-4174-20-23**

Amount of Each Receipt this Period  
 6.31

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

Mailing Address One Penn Mark Plaza

City Carmel State IN Zip Code 46032

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 721.30

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-4166-20-24**

Amount of Each Receipt this Period  
 6.31

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 24.62

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

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

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

FOR LINE NUMBER: PAGE 82 OF 105  
(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. Cathrin Stickney**  
 Mailing Address 1050 Hyatt Rd  
 City State Zip Code  
 Southold NY 11971-3118  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-7505-20-23**  
 Amount of Each Receipt this Period  
 19.25

Full Name (Last, First, Middle Initial)  
**B. Cathrin Stickney**  
 Mailing Address 1050 Hyatt Rd  
 City State Zip Code  
 Southold NY 11971-3118  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-7491-20-24**  
 Amount of Each Receipt this Period  
 19.25

Full Name (Last, First, Middle Initial)  
**C. John Stroemer**  
 Mailing Address 11095 Viking Dr  
 City State Zip Code  
 Eden Prairie MN 55344-7223  
 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 ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-18485-20-23**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 58.50  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 83 OF 105  
(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 Stroemer**

Mailing Address 11095 Viking Dr

City State Zip Code  
 Eden Prairie MN 55344-7223

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 ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-18428-20-24**

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 1000 Corporate Centre Dr

City State Zip Code  
 Franklin TN 37067-2611

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-1646-20-23**

Amount of Each Receipt this Period  
 15.00

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

Mailing Address 1000 Corporate Centre Dr

City State Zip Code  
 Franklin TN 37067-2611

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-1643-20-24**

Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 105
	<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. 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 / 13 / 2012**  
**Transaction ID : 20120910-11335-20-23**

Amount of Each Receipt this Period **26.93**

**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 / 27 / 2012**  
**Transaction ID : 20120924-11308-20-24**

Amount of Each Receipt this Period **26.93**

**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 ▼ **366.98**

Date of Receipt **09 / 13 / 2012**  
**Transaction ID : 20120910-4156-20-23**

Amount of Each Receipt this Period **18.47**

**SUBTOTAL** of Receipts This Page (optional)..... **72.33**

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

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

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

FOR LINE NUMBER: PAGE 85 OF 105  
(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. 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 ▼ 366.98

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-4148-20-24**  
 Amount of Each Receipt this Period 18.47

**B. Jan C. Sykes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25600 N Norterra Dr Bldg B  
 City Phoenix State AZ Zip Code 85085-8201  
 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 ▼ 280.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-8697-20-23**  
 Amount of Each Receipt this Period 50.00

**c. Jan C. Sykes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25600 N Norterra Dr Bldg B  
 City Phoenix State AZ Zip Code 85085-8201  
 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 ▼ 280.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-8676-20-24**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 118.47  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 86 OF 105  
(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. Jeff S. Terrill**

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 RVP Segment Lead

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-8052-20-23**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Jeff S. Terrill**

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 RVP Segment Lead

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-8037-20-24**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. Jeffrey Thackeray**

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 ▼  
 301.16

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-217-20-23**

Amount of Each Receipt this Period  
 15.40

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55.40

**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 87 OF 105
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Jeffrey Thackeray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-217-20-24**  
 Amount of Each Receipt this Period  
 15.40

**B. Jeffrey E. Tindall**  
 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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-11534-20-23**  
 Amount of Each Receipt this Period  
 20.00

**C. Jeffrey E. Tindall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City 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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-11506-20-24**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55.40  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 88 OF 105  
(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) <b>A. Rachel M. Tressy</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>/</td> <td>13</td> <td>/</td> <td>2012</td> </tr> </table> <b>Transaction ID : 20120910-8327-20-23</b>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	13	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y									
09	/	13	/	2012									
Mailing Address 900 Cottage Grove Rd			Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00									
10.00													
City Hartford	State CT	Zip Code 06152-0001											
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> </tr> </table>			C										
C													
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Underwriting Segment Lead												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>560.00</td> </tr> </table>		560.00										
560.00													

Full Name (Last, First, Middle Initial) <b>B. Rachel M. Tressy</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>/</td> <td>27</td> <td>/</td> <td>2012</td> </tr> </table> <b>Transaction ID : 20120924-8310-20-24</b>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	27	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y									
09	/	27	/	2012									
Mailing Address 900 Cottage Grove Rd			Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00									
10.00													
City Hartford	State CT	Zip Code 06152-0001											
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> </tr> </table>			C										
C													
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Underwriting Segment Lead												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>560.00</td> </tr> </table>		560.00										
560.00													

Full Name (Last, First, Middle Initial) <b>C. Katharine L. Wade</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>/</td> <td>13</td> <td>/</td> <td>2012</td> </tr> </table> <b>Transaction ID : 20120910-726-20-23</b>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	13	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y									
09	/	13	/	2012									
Mailing Address 900 Cottage Grove Rd			Amount of Each Receipt this Period <table border="1"> <tr> <td>125.00</td> </tr> </table>	125.00									
125.00													
City Hartford	State CT	Zip Code 06152-0001											
FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> </tr> </table>			C										
C													
Name of Employer Cigna Corp.	Occupation VP Public Policy												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>2185.00</td> </tr> </table>		2185.00										
2185.00													

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>145.00</td> </tr> </table>	145.00
145.00		
<b>TOTAL</b> This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

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

FOR LINE NUMBER: PAGE 89 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Katharine L. Wade**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Hartford CT 06152-0001

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

Name of Employer Occupation  
 Cigna Corp. VP Public Policy

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2185.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-723-20-24**

Amount of Each Receipt this Period  
 125.00

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

Mailing Address 2700 Post Oak Blvd

City State Zip Code  
 Houston TX 77056-5784

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 598.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-7408-20-23**

Amount of Each Receipt this Period  
 29.93

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

Mailing Address 2700 Post Oak Blvd

City State Zip Code  
 Houston TX 77056-5784

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 598.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-7394-20-24**

Amount of Each Receipt this Period  
 29.93

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **184.86**

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

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

Full Name (Last, First, Middle Initial) <b>A. Patricia J. Walsh</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2012 <b>Transaction ID : 20120910-22602-20-23</b>
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 Cigna Corp.	Occupation VP Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Patricia J. Walsh</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-22525-20-24</b>
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 Cigna Corp.	Occupation VP Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph Wankerl</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 20120924-8776-20-24</b>
Mailing Address 900 Cottage Grove Rd		Amount of Each Receipt this Period 10.10
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 91 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Scott D. Watson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 231 S Bemiston Ave  
 City Clayton State MO Zip Code 63105-1914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Senior Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 642.95

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-4545-20-23**  
 Amount of Each Receipt this Period 16.46

**B. Scott D. Watson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 231 S Bemiston Ave  
 City Clayton State MO Zip Code 63105-1914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Senior Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 642.95

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-4536-20-24**  
 Amount of Each Receipt this Period 16.46

**C. Christopher J. Whelan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 Cottage Grove Rd  
 City Hartford State CT Zip Code 06152-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer 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 09 / 13 / 2012  
**Transaction ID : 20120910-11157-20-23**  
 Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 52.92  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Christopher J. 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 / 27 / 2012  
**Transaction ID : 20120924-11131-20-24**  
 Amount of Each Receipt this Period  
 20.00

**B. 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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2012  
**Transaction ID : 20120910-8286-20-23**  
 Amount of Each Receipt this Period  
 20.00

**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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012  
**Transaction ID : 20120924-8269-20-24**  
 Amount of Each Receipt this Period  
 20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Eric Witherspoon**  
Full Name (Last, First, Middle Initial)

Mailing Address 401 Chestnut St

City Chattanooga State TN Zip Code 37402-4924

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Underwriting Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-5231-20-23**

Amount of Each Receipt this Period 15.00

**B. Eric Witherspoon**  
Full Name (Last, First, Middle Initial)

Mailing Address 401 Chestnut St

City Chattanooga State TN Zip Code 37402-4924

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Underwriting Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2012  
**Transaction ID : 20120924-5223-20-24**

Amount of Each Receipt this Period 15.00

**c. Martin J. Wong**  
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 Deputy General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 13 / 2012  
**Transaction ID : 20120910-22690-20-23**

Amount of Each Receipt this Period 50.00

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

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

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

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

FOR LINE NUMBER: PAGE 94 OF 105  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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 Deputy General Counsel

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 950.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-22613-20-24**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**B. Bu Yang**

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 ▼  
 423.00

Date of Receipt  
 09 / 13 / 2012  
**Transaction ID : 20120910-8019-20-23**

Amount of Each Receipt this Period  
 21.15

Full Name (Last, First, Middle Initial)  
**C. Bu Yang**

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 ▼  
 423.00

Date of Receipt  
 09 / 27 / 2012  
**Transaction ID : 20120924-8004-20-24**

Amount of Each Receipt this Period  
 21.15

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 92.30

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 OF 105 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

Mailing Address 11095 Viking Dr

City Eden Prairie State MN Zip Code 55344-7223

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

Name of Employer Cigna Corp. Occupation Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 13 / 2012**

**Transaction ID : 20120910-12725-20-23**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 11095 Viking Dr

City Eden Prairie State MN Zip Code 55344-7223

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

Name of Employer Cigna Corp. Occupation Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : 20120924-12696-20-24**

Amount of Each Receipt this Period  
**20.00**

**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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>40.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>11770.60</b>

**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. Cantwell Victory 2012**

Mailing Address 3518 Fremont Avenue North  
#545

City State Zip Code  
Seattle WA 98103

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Cantwell Victory 2012**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2012

**Transaction ID : E01BA17A26B3818356B**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Coffman for Congress 2012**

Mailing Address 9249 South Broadway #200-501

City State Zip Code  
Highlands Ranch CO 80129

Purpose of Disbursement  
2012 General

011

Candidate Name

**Mike Coffman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: CO District: 06

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2012

**Transaction ID : 8E7C41DB083E44136C0**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street, SE  
2nd Floor

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Democratic Congressional Campaign Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2012

**Transaction ID : 343CD21451487191583**

Amount of Each Disbursement this Period

5000.00

**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

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

Full Name (Last, First, Middle Initial)

**A. Devin Nunes Campaign Committee**

Mailing Address PO Box 6545

City State Zip Code  
Visalia CA 93290-6545

Purpose of Disbursement  
2012 General

011

Candidate Name

**Devin G. Nunes**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 22

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2012

**Transaction ID : D8B84DB692EAF32BBB0**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Friends of Maria**

Mailing Address PO Box 12740

City State Zip Code  
Seattle WA 98111

Purpose of Disbursement  
Split from JFC Disbursement to Cantwell Victory 2012

011

Candidate Name

**Maria Cantwell**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WA District:

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2012

**Transaction ID : B04B9D3BAF2E689D18F**

Amount of Each Disbursement this Period

1000.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Friends of Pat Toomey**

Mailing Address 228 S. Washington St., Suite 115

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Patrick Joseph Toomey**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2012

**Transaction ID : 25CC9F8CC8E36B85C5A**

Amount of Each Disbursement this Period

2500.00

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

5000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Kinzinger for Congress**

Mailing Address PO Box 487

City New Lenox State IL Zip Code 60451-0487

Purpose of Disbursement  
2012 General

011

Category/  
Type

Candidate Name

**Adam Kinzinger**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 16

Date of Disbursement

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

Transaction ID : 620C6066CEF03A2238F

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Larson for Congress**

Mailing Address PO Box 479

City Glastonbury State CT Zip Code 06033-0479

Purpose of Disbursement  
2012 General

011

Category/  
Type

Candidate Name

**John B. Larson**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CT District: 01

Date of Disbursement

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

Transaction ID : DC24E2CCD6FA3D5634B

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Mark Critz for Congress Committee**

Mailing Address 647 Main Street  
Suite 110

City Johnstown State PA Zip Code 15901

Purpose of Disbursement  
2012 General

011

Category/  
Type

Candidate Name

**Mark S. Critz**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

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

Transaction ID : CB9E9A5ECDFDF879E9F

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

8	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

8	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

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

Full Name (Last, First, Middle Initial)

## A. McConnell Senate Committee '14

Mailing Address PO Box 1496

City Louisville State KY Zip Code 40201

Purpose of Disbursement  
2014 General

011

Candidate Name

**Mitch McConnell**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: KY District:

Date of Disbursement

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

Transaction ID : 87F49FB8927E5ECAD2E

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

## B. Synergy PAC

Mailing Address 6849 Old Dominion Drive  
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Synergy PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

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

Transaction ID : 95AB5585798F6E73566

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--	--	--

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

7	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

2	8	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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Bethel for Georgia Senate**

Mailing Address 1701 Briarcliff Circle

City Dalton State GA Zip Code 30720

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2012

Transaction ID : 60C041342F5D32A9FDC

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Casey Cagle for Lt. Governor**

Mailing Address PO Box 12137

City Atlanta State GA Zip Code 30355

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2012

Transaction ID : E0714A25B1C4BD10B71

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Howard Maxwell**

Mailing Address 716 Graham Road

City Dallas State GA Zip Code 30132

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2012

Transaction ID : AB22D8AB670305367BB

Amount of Each Disbursement this Period

500.00

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

1750.00

**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

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

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Jack Hill**

Mailing Address PO Box 486  
133 Mimosa Circle

City Reidsville State GA Zip Code 30453

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : A726BAAD9BA42668865**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Renee Unterman**

Mailing Address PO Box 508

City Buford State GA Zip Code 30518

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 8FDCB9F644E43B0BF0D**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Committee To Elect Richard H. Smith**

Mailing Address PO Box 2122

City Columbus State GA Zip Code 31902

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 898EB0CEB72A6E1936E**

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Committee To Re-elect Nikki Randall**

Mailing Address PO Box 121

City Macon State GA Zip Code 31202

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2012

Transaction ID : AB26C0644291E874DFE

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Friends and Neighbors to Elect Margaret Kaiser**

Mailing Address 504 Hill St, SE

City Atlanta State GA Zip Code 30312

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2012

Transaction ID : 7F7574F136E6A08C0BA

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Friends of Karla Drenner**

Mailing Address PO Box 348

City Avondale Estates State GA Zip Code 30002

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2012

Transaction ID : 94AB65918C9A859DF1E

Amount of Each Disbursement this Period

250.00

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

750.00

**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

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

Full Name (Last, First, Middle Initial)

**A. Friends of Stacey Y. Abrams, Inc.**

Mailing Address PO Box 5750

City Atlanta State GA Zip Code 31107

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 / 14 / 2012

Transaction ID : 9AC403857D812F50371

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Friends of Tommie Williams**

Mailing Address 148 Williams Ave

City Lyons State GA Zip Code 30346

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 / 14 / 2012

Transaction ID : 6D37AB6408C0C822C1D

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**C. Henson for Senate**

Mailing Address 2643 Sterling Acres Dr

City Tucker State GA Zip Code 30084

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 / 14 / 2012

Transaction ID : A6E5721BFF06D9A82C0

Amount of Each Disbursement this Period

500.00

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

1750.00

**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

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

Full Name (Last, First, Middle Initial)

**A. Jason Carter Campaign Committee, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2012

Mailing Address PO Box 573

**Transaction ID : 3914F5DCDA1930FB1CA**

City Decatur State GA Zip Code 30031

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
Nonfederal Contribution

011
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Ralston for Representative Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2012

Mailing Address PO Box 1196

**Transaction ID : 0C588D0B8AA273E6A3E**

City Blue Ridge State GA Zip Code 30513

Amount of Each Disbursement this Period

750.00
--------

Purpose of Disbursement  
Nonfederal Contribution

011
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Sharon Cooper for State House**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2012

Mailing Address 1234 Powers Ferry Cm Ste 104

**Transaction ID : 53F81147B6BC4780B50**

City Marietta State GA Zip Code 30067

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Nonfederal Contribution

011
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

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

1500.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

### A. The Committee to Elect John Meadows

Mailing Address PO Box 1255

City Calhoun State GA Zip Code 30703

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		1	4		2	0	1	2		

Transaction ID : 4D2EBA67DCF5B5F143C

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

750.00

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

8250.00