

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on 11 04 2008 in the State of  
(d) 30-Day **Post**-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 10 01 2008 through 10 15 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas McCarthy

Signature of Treasurer Electronically Filed by Thomas McCarthy Date 10 23 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
CIGNA Corporation Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		12499.05
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	13436.08									
(c) Total Receipts (from Line 19) .....	8183.85	169582.88								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	21619.93	182081.93								
7. Total Disbursements (from Line 31) .....	9250.00	169712.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	12369.93	12369.93								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
CIGNA Corporation Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4755.13	67162.58
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	3428.72	100124.30
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	8183.85	167286.88
(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) .....	8183.85	167286.88
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	2296.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	8183.85	169582.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	8183.85	169582.88

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4750.00	123500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	602.00
(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	602.00
29. Other Disbursements.....	4500.00	45610.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9250.00	169712.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9250.00	169712.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	8183.85	167286.88
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	602.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8183.85	166684.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 64

(check only one)

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

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

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

**A.**

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

Mailing Address 252 North Main Street

City State Zip Code  
Doylestown PA 18901

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

Name of Employer Occupation  
CBH Provider Oversight Medical Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 538.60

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-16123-13-0

Amount of Each Receipt this Period  
26.93

**B.**

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

Mailing Address 3 Huntington Dr

City State Zip Code  
Randolph NJ 07869

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 ▼ 385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-393-13-0

Amount of Each Receipt this Period  
19.25

**C.**

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

Mailing Address 394 W Remington Dr

City State Zip Code  
Chandler AZ 85248

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1029.46

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-7133-13-0

Amount of Each Receipt this Period  
50.86

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

97.04

**TOTAL** This Period (last page this line number 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 / 64  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
CIGNA Corporation Political Action Committee

**A.**

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

Mailing Address 2632 Lovejoy Cir

City Duluth State GA Zip Code 30097

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-16222-13-0

Amount of Each Receipt this Period  
85.00

**B.**

Full Name (Last, First, Middle Initial)  
Rosemary B. Bartley

Mailing Address Po Box 9153

City North Saint Paul State MN Zip Code 55109

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

Name of Employer CIGNA BEHAVIORAL HEALTH, INC. Occupation Business Project Senior Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-7818-13-0

Amount of Each Receipt this Period  
15.00

**C.**

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

Mailing Address 2126 Inverness Ln

City Berwyn State PA Zip Code 19312

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

Name of Employer CIGNA CORPORATION Occupation Executive Vice President Chief Financi

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-5638-13-0

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 8 / 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephanie Bellamy		Date of Receipt
	Mailing Address 7260 Wissahickon Avenue		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Philadelphia	PA	19119
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer FIN Corp Development		Occupation Financial Analysis Senior Director	<b>Transaction ID:</b> 20081002-3933-13-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="25.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Jodi M. Berry		Date of Receipt
	Mailing Address 179 McIntosh Circle		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Jackson	GA	30233
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Senior Account Manager	<b>Transaction ID:</b> 20081002-9096-13-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="220.41"/>	<input type="text" value="3.80"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Kim Bimestefer		Date of Receipt
	Mailing Address 11 Colts Run Rd		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Princeton	NJ	08540
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation General Manager	<b>Transaction ID:</b> 20081002-11267-13-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="25.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="53.80"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 64

(check only one)

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

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

**A.**

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

Mailing Address 1403 Greenwood Avenue

City State Zip Code  
Nashville TN 37206

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-18933-13-0

Amount of Each Receipt this Period  
50.00

**B.**

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

Mailing Address 7022 W Kimberly Way

City State Zip Code  
Glendale AZ 85308

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

Name of Employer Occupation  
CIGNA HEALTHCARE OF AZ, INC Otolaryngologist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 440.80

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-7988-13-0

Amount of Each Receipt this Period  
22.04

**C.**

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

Mailing Address 385 Deercliff Road

City State Zip Code  
Avon CT 06001

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

Name of Employer Occupation  
CIGNA Corporation Svp Service Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1832.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-18839-13-0

Amount of Each Receipt this Period  
85.00

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

157.04

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Zigmund R. Brzezinski	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 15 Olden Dr	<b>Transaction ID:</b> 20081002-3367-13-0
	City State Zip Code Flemington NJ 08822	Amount of Each Receipt this Period 14.96
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.75	

<b>B.</b>	Full Name (Last, First, Middle Initial) M. Buckley	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 3651 N Leavitt St	<b>Transaction ID:</b> 20081002-5730-13-0
	City State Zip Code Chicago IL 60618	Amount of Each Receipt this Period 9.62
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Account Manager-National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 616.18	

<b>C.</b>	Full Name (Last, First, Middle Initial) Timothy D. Buckley	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 611 Shipton Lane	<b>Transaction ID:</b> 20081002-18363-13-0
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 29.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA Internation	Occupation Vice President Bfo International	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 580.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>53.58</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 11 / 64  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial) Gregory Cain		Date of Receipt MM / DD / YYYY 10 / 02 / 2008
Mailing Address 3802 Highland Dr		<b>Transaction ID:</b> 20081002-10900-13-0
City Boothwyn	State PA	Zip Code 19061
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 11.05
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Account Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	

**B.**

Full Name (Last, First, Middle Initial) Rudolph C. Cane		Date of Receipt MM / DD / YYYY 10 / 02 / 2008
Mailing Address 4619 E White Aster St		<b>Transaction ID:</b> 20081002-3939-13-0
City Phoenix	State AZ	Zip Code 85044
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 19.25
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

**C.**

Full Name (Last, First, Middle Initial) Charles Carlson		Date of Receipt MM / DD / YYYY 10 / 02 / 2008
Mailing Address 404 Wild Iris Lane		<b>Transaction ID:</b> 20081002-18838-13-0
City Powder Springs	State GA	Zip Code 30127
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer CHC Natl Southeast Sales	Occupation Market Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>50.30</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 12 / 64  
(check only one)

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

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

**A.**

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

Mailing Address 70 Waterside Lane

City State Zip Code  
West Hartford CT 06107

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-872-13-0

Amount of Each Receipt this Period  
25.00

**B.**

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

Mailing Address 28 William Penn Rd

City State Zip Code  
Warren NJ 07059

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE General Manager  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-2108-13-0

Amount of Each Receipt this Period  
15.00

**C.**

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

Mailing Address 517 Wildflower Ln

City State Zip Code  
Media PA 19063

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

Name of Employer Occupation  
CIGNA CORPORATION Human Resources Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-11097-13-0

Amount of Each Receipt this Period  
20.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 64  
(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

**A.**

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

Mailing Address 2 Reed Hill Rd

City State Zip Code  
Granby CT 06035

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Coli

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-470-13-0

Amount of Each Receipt this Period  
90.00

**B.**

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

Mailing Address 99 Hummingbird Dr

City State Zip Code  
Berlin CT 06037

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-15135-13-0

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Christopher M. Coloian

Mailing Address 36 Ruth Circle

City State Zip Code  
Malvern PA 19355

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Clinical Program Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-11473-13-0

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **135.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 64  
(check only one)

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

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

**A.**

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

Mailing Address 32 Lucy Way

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO President & Chief Oper Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2315.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-576-13-0

Amount of Each Receipt this Period  
120.00

**B.**

Full Name (Last, First, Middle Initial)  
Henri R. Courmand

Mailing Address 6009 Tiffield Way

City State Zip Code  
Wake Forest NC 27587

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Financial Analysis Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-9092-13-0

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 47 Leigh Gate Road

City State Zip Code  
Glastonbury CT 06033-4174

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

Name of Employer Occupation  
CIGNA CORPORATION Senior Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-11850-13-0

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **160.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen W. Crawford	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 216 B Avenue	<b>Transaction ID:</b> 20081002-17971-13-0
	City State Zip Code Coronado CA 92118	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CHC Lifesource Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.75	

<b>B.</b>	Full Name (Last, First, Middle Initial) Andrew D. Crooks	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 323 Turtle Trl	<b>Transaction ID:</b> 20081002-11090-13-0
	City State Zip Code Lake Mary FL 32746	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Donald M. Curry	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 56 Harvard Ln	<b>Transaction ID:</b> 20081002-13411-13-0
	City State Zip Code Bedford NH 03110	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	64.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Marcia A. Dall		Date of Receipt
	Mailing Address 33 Old Stone Crossing		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	West Hartford	CT	06117
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20081002-21859-13-0
Name of Employer CIGNA CORPORATION		Occupation Svp Bfo	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="85.00"/>
		<input type="text" value="680.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kristin Damato		Date of Receipt
	Mailing Address 2610 John Marshall Drive North		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Arlington	VA	22207
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20081002-3095-13-0
Name of Employer CIGNA CORPORATION		Occupation Government Affairs Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="15.00"/>
		<input type="text" value="300.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Johannes M. De Jong		Date of Receipt
	Mailing Address 6122 Mccallum St		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Philadelphia	PA	19144
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20081002-280-13-0
Name of Employer CIGNA CORPORATION		Occupation Vice President Chief Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
		<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="125.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 64  
(check only one)

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

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

**A.**

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

Mailing Address 17 Swallow Rd

City State Zip Code  
Holland PA 18966

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Investor Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
10 / 02 / 2008

**Transaction ID:** 20081002-3211-13-0

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Keith Dixon

Mailing Address 1715 Morgan Ave S

City State Zip Code  
Minneapolis MN 55405

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

Name of Employer Occupation  
CIGNA BEHAVIORAL HEALTH, INC. President Health Solutions

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 02 / 2008

**Transaction ID:** 20081002-7710-13-0

Amount of Each Receipt this Period  
25.00

**C.**

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

Mailing Address 1901 E Royal Palm Rd

City State Zip Code  
Phoenix AZ 85020

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.59

Date of Receipt  
MM / DD / YYYY  
10 / 02 / 2008

**Transaction ID:** 20081002-37-13-0

Amount of Each Receipt this Period  
6.25

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **51.25**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 64  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
CIGNA Corporation Political Action Committee

**A.**

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

Mailing Address 302 Highland Valley Ct.

City State Zip Code  
Wylie TX 75098

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-13250-13-0

Amount of Each Receipt this Period  
15.00

**B.**

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

Mailing Address 9211 Sand Hill St

City State Zip Code  
Highlands Ranch CO 80126

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO General Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-8059-13-0

Amount of Each Receipt this Period  
25.00

**C.**

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

Mailing Address 17 Hillyer Way

City State Zip Code  
Granby CT 06035

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

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

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

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-5908-13-0

Amount of Each Receipt this Period  
11.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **51.00**

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

# SCHEDULE A (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 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Beverly J. Everett		Date of Receipt
	Mailing Address 8228 Academy Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Ellicott City	MD	21043
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20081002-125-13-0
Name of Employer INT'L REHAB. ASSOCIATES, INC.		Occupation Medical Senior Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 20.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Fair		Date of Receipt
	Mailing Address 1758 Boulevard		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	City	State	Zip Code
	West Hartford	CT	06107
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20081002-276-13-0
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Investment Managing Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 20.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Kimberly Feltovic		Date of Receipt
	Mailing Address 905 S. 2nd Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Philadelphia	PA	19147
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20081002-16286-13-0
Name of Employer CHC Sales Effectives Staffing		Occupation Account Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 385.00	<input type="text"/> 19.25

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 59.25
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 20 / 64</span>
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Staci F. Fernandez	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 15 Dilaj Dr	<b>Transaction ID:</b> 20081002-2342-13-0
	City State Zip Code Columbia CT 06237	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Marketing Comm Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Karen E. Ferrell	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 1005 Chesson Ct	<b>Transaction ID:</b> 20081002-14424-13-0
	City State Zip Code Alpharetta GA 30022	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Svp Contr Provid Netwk Med Mgt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) David Ferriss	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 7 Woods Lane	<b>Transaction ID:</b> 20081002-10326-13-0
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Medical Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>130.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 64

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)

Scott M. Filiault

Mailing Address 135 Timrod Rd

City State Zip Code  
Manchester CT 06040

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-292-13-0

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Richard H. Forde

Mailing Address 5 Brighton Ln

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Svp Chief Investment Officer  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1800.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-1091-13-0

Amount of Each Receipt this Period

90.00

**C.**

Full Name (Last, First, Middle Initial)

Robert S. Fry

Mailing Address 1004 Beech Bay Rd

City State Zip Code  
Poplar Grove IL 61065

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-3609-13-0

Amount of Each Receipt this Period

20.00

**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 22 / 64  
(check only one)

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

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

**A.**

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

Mailing Address 31 Lakeshore Dr

City State Zip Code  
Rockaway NJ 07866

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-2535-13-0

Amount of Each Receipt this Period  
19.25

**B.**

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

Mailing Address 2030 James Farm Rd

City State Zip Code  
Stratford CT 06614

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Senior Account Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
579.89

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-5143-13-0

Amount of Each Receipt this Period  
6.73

**C.**

Full Name (Last, First, Middle Initial)  
Paul J. Gontarek

Mailing Address 7442 Devon St

City State Zip Code  
Philadelphia PA 19119

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

Name of Employer  
CIGNA CORPORATION

Occupation  
Association Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-3751-13-0

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **50.98**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) David A. Gordon		Date of Receipt
	Mailing Address 121 Grandview Dr		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Glastonbury	CT	06033
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20081002-1345-13-0
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Marketing Product Senior Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	<input type="text" value="15.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Donna W. Gore		Date of Receipt
	Mailing Address 12 Scarborough Rd		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Windsor	CT	06095
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20081002-261-13-0
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Financial Analysis Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="217.57"/>	<input type="text" value="10.91"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Gray		Date of Receipt
	Mailing Address 138 Ballard Dr		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	West Hartford	CT	06119
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20081002-2425-13-0
Name of Employer CIGNA CORPORATION		Occupation Strat and Business Develop Senior Dire	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="470.00"/>	<input type="text" value="25.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="50.91"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 64  
(check only one)

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

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

**A.**

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

Mailing Address 17 Pheasant Lane

City State Zip Code  
Scotch Plains NJ 07076

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

Name of Employer Occupation  
CGI CGI Executive Staff Vice President Sales and Emerging Mkts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1800.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-19149-13-0

Amount of Each Receipt this Period  
90.00

**B.**

Full Name (Last, First, Middle Initial)  
Douglas R. Hadley

Mailing Address 126 Hopmeadow Street

City State Zip Code  
Weatogue CT 06089

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-8433-13-0

Amount of Each Receipt this Period  
25.00

**C.**

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

Mailing Address 131 Crown Court

City State Zip Code  
Troutman NC 28166

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.60

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-6788-13-0

Amount of Each Receipt this Period  
10.58

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **125.58**

**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 25 / 64

(check only one)

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

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

**A.**

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

Mailing Address 9414 Indianfield DV

City State Zip Code  
Mechanicsville VA 23116

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

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

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

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-6881-13-0

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 1005 Bent Rd

City State Zip Code  
Media PA 19063

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

Name of Employer Occupation  
CIGNA CORPORATION Chairman and Chief Executive Officer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3846.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-3668-13-0

Amount of Each Receipt this Period  
192.30

**C.**

Full Name (Last, First, Middle Initial)  
Cheryl S. Haynes

Mailing Address 5320 Sunnyvale Dr

City State Zip Code  
Antioch TN 37013

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Business Analysis Senior Spec  
CO

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

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-4820-13-0

Amount of Each Receipt this Period  
11.00

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

223.30

**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 26 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Clay R. Hedlund		Date of Receipt
	Mailing Address 2504 Briarcrest Dr		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Irving	TX	75063
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CIGNA DENTAL HEALTH, INC.		Occupation Dentist	<b>Transaction ID:</b> 20081002-8412-13-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="251.61"/>	<input type="text" value="12.71"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) G. Hoagland		Date of Receipt
	Mailing Address 10012 Rough Run Court		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Fairfax	VA	22039
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer L&PA CIGNA-General Counsel		Occupation Vice President Government Affairs	<b>Transaction ID:</b> 20081002-18771-13-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1400.00"/>	<input type="text" value="70.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert P. Hockmuth		Date of Receipt
	Mailing Address 135 Brackett Rd		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Rye	NH	03870
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Senior Director	<b>Transaction ID:</b> 20081002-939-13-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="384.80"/>	<input type="text" value="19.24"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="101.95"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dale Hovey		Date of Receipt
	Mailing Address 6 Westborough Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Weatogue	CT	06089
	FEC ID number of contributing federal political committee.		Transaction ID: 20081002-1142-13-0
		Amount of Each Receipt this Period	<input type="text"/>
			20.00
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation App Development Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
			400.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Scott C. Hudson		Date of Receipt
	Mailing Address 3374 Sweeney Hollow Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Franklin	TN	37064
	FEC ID number of contributing federal political committee.		Transaction ID: 20081002-4088-13-0
		Amount of Each Receipt this Period	<input type="text"/>
			10.96
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Operations Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
			215.34

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert J. Hughes		Date of Receipt
	Mailing Address 120 Shandon Pl		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Malvern	PA	19355
	FEC ID number of contributing federal political committee.		Transaction ID: 20081002-1646-13-0
		Amount of Each Receipt this Period	<input type="text"/>
			20.00
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation Svp General Manager, Intl	
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) .....	<input type="text"/>
	50.96
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 28 / 64</span>
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Moin M. Itekhhar	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 210 Cabot Court	<b>Transaction ID:</b> 20081002-2583-13-0
	City State Zip Code Deptford NJ 08096	Amount of Each Receipt this Period 10.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Database Administrator Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 205.98	

<b>B.</b>	Full Name (Last, First, Middle Initial) Abdul-Alim Issa	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 5 Corvette Ct	<b>Transaction ID:</b> 20081002-145-13-0
	City State Zip Code New Castle DE 19720	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Underwriting Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Malcolm D. Jackson	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 28 Cedar Meadow Lane	<b>Transaction ID:</b> 20081002-17457-13-0
	City State Zip Code Media PA 19063	Amount of Each Receipt this Period 27.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CIGNA CORPORATION Occupation Business Unit I.T. Senior Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	62.35
<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 29 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) William S. Jameson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 8		
	Mailing Address 690 Bradford St		<b>Transaction ID:</b> 20081002-8644-13-0		
	City Pasadena	State CA	Zip Code 91105	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Association Chief Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank E. Jones		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 8		
	Mailing Address 2622 Cedarvue Dr		<b>Transaction ID:</b> 20081002-3904-13-0		
	City Upper St Clair	State PA	Zip Code 15241	Amount of Each Receipt this Period 16.28	
	FEC ID number of contributing federal political committee. <b>C</b>				
	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 ▼ 325.64			

<b>C.</b>	Full Name (Last, First, Middle Initial) Scott Josephs		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 8		
	Mailing Address 403 Tramore Dr		<b>Transaction ID:</b> 20081002-9377-13-0		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Medical Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	66.28
<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 30 / 64  
(check only one)

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

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

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

Mailing Address 50 Stoneham Dr

City State Zip Code  
West Hartford CT 06117

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Vice President Chief Medical Officer  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2900.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-12513-13-0

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3603a Happy Valley Rd

City State Zip Code  
Lafayette CA 94549

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 804.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-8850-13-0

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Coretta H. Key

Mailing Address 136 Arapahoe St

City State Zip Code  
Woodland Park CO 80863

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Quality Manager  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 213.46

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-4604-13-0

Amount of Each Receipt this Period  
10.89

**SUBTOTAL** of Receipts This Page (optional) ..... ► 160.89

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 64  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 106 E Valley Creek Rd

City State Zip Code  
Plymouth Meeting PA 19462

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-15810-13-0

Amount of Each Receipt this Period  
15.00

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

Mailing Address 221 Lone Oak Village Way

City State Zip Code  
Nashville TN 37215

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

Name of Employer Occupation  
CHC Government Services Operations Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-16594-13-0

Amount of Each Receipt this Period  
20.00

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

Mailing Address 98 Garfield Rd

City State Zip Code  
West Hartford CT 06107

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Clinical Program Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-1125-13-0

Amount of Each Receipt this Period  
12.50

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kenneth P. Langevin		Date of Receipt MM / DD / YYYY 10 / 02 / 2008		
	Mailing Address 32 Castlewood Rd		<b>Transaction ID:</b> 20081002-1628-13-0		
	City West Hartford	State CT	Zip Code 06107	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION	Occupation Senior Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) William P. Lawless		Date of Receipt MM / DD / YYYY 10 / 02 / 2008		
	Mailing Address 509 S Bay Shore Blvd		<b>Transaction ID:</b> 20081002-2330-13-0		
	City Gilbert	State AZ	Zip Code 85233	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Family Practice			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Lisa Lawrence		Date of Receipt MM / DD / YYYY 10 / 02 / 2008		
	Mailing Address 1300 Fishing Lake Dr		<b>Transaction ID:</b> 20081002-4211-13-0		
	City Odessa	State FL	Zip Code 33556	Amount of Each Receipt this Period 13.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 273.57			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	48.92
<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 33 / 64  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Christopher R. Loomis

Mailing Address 909 Overton Ave

City State Zip Code  
Yardley PA 19067

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

Name of Employer Occupation  
CIGNA CORPORATION Association Chief Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-5873-13-0

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Maureen Macinnis

Mailing Address 65 Joanna Way

City State Zip Code  
Short Hills NJ 07078

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

Name of Employer Occupation  
HR&S HR&S Executive Staff Human Resources Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-17531-13-0

Amount of Each Receipt this Period  
19.25

**C.**

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

Mailing Address 22 Crosswood Rd

City State Zip Code  
Farmington CT 06032

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Clinical Program Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-8441-13-0

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **54.25**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 64  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
William J. Maher

Mailing Address 16 Sheffield Dr

City State Zip Code  
Moorestown NJ 08057

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-4155-13-0

Amount of Each Receipt this Period  
12.00

**B.**

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

Mailing Address 47 Kelsey Ln

City State Zip Code  
Glastonbury CT 06033

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-321-13-0

Amount of Each Receipt this Period  
19.00

**C.**

Full Name (Last, First, Middle Initial)  
Lance D. Marshall

Mailing Address 316 Cornerstone Drive

City State Zip Code  
Chattanooga TN 37421

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 423.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-15280-13-0

Amount of Each Receipt this Period  
21.15

**SUBTOTAL** of Receipts This Page (optional) ..... ► **52.15**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 64

(check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark P. Marsters		Date of Receipt	
	Mailing Address 13 Devonshire Ln		M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20081002-13688-13-0
	Malvern	PA	19355	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation Vice President Service Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas J. Martel		Date of Receipt	
	Mailing Address 23 Tack Ct		M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20081002-13240-13-0
	Edgewater	MD	21037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation General Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) John W. Matheny		Date of Receipt	
	Mailing Address 43 S Taylor Point Dr		M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20081002-5426-13-0
	The Woodlands	TX	77382	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		17.31	
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Provider Contracting Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 342.74		

**SUBTOTAL** of Receipts This Page (optional) ..... ► **92.31**

**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 36 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Glenn Maykish	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	Mailing Address 14 Stoneybrook Ln	<b>Transaction ID:</b> 20081002-13212-13-0
	City Malvern State PA Zip Code 19355	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Sales Director-Sales Mgt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 327.25	

<b>B.</b>	Full Name (Last, First, Middle Initial) William McGean	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	Mailing Address 10 Grosvenor Rd	<b>Transaction ID:</b> 20081002-10898-13-0
	City Waltham State MA Zip Code 02453	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Operations Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Steven G. Mellas	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	Mailing Address 20 Lexington Mnr	<b>Transaction ID:</b> 20081002-2146-13-0
	City Glenmoore State PA Zip Code 19343	Amount of Each Receipt this Period 12.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer CIGNA CORPORATION Occupation Compliance Senior Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	46.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Morris D. Mirabella	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 5820 Aventura Ct	<b>Transaction ID:</b> 20081002-9071-13-0
	City State Zip Code Tampa FL 33625	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
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) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kymberly P. Miranda	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 5633 Nw 88th Ter	<b>Transaction ID:</b> 20081002-5921-13-0
	City State Zip Code Coral Springs FL 33067	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Account Manager-National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jodie K. Mirfendereski	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 104 Glenlivet Pl	<b>Transaction ID:</b> 20081002-5030-13-0
	City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 10.91
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 212.57	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>45.91</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 38 / 64  
(check only one)

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

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

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

Mailing Address 105 Mill View Ln

City State Zip Code  
Newtown Square PA 19073

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

Name of Employer Occupation  
CIGNA CORPORATION E.V.P. Human Resources & Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-14104-13-0

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3102 Falling Acorn Circle

City State Zip Code  
Lake Mary FL 32746

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-11032-13-0

Amount of Each Receipt this Period  
12.00

**C.** Full Name (Last, First, Middle Initial)  
Paula Murphy

Mailing Address 11 Dally Farms Rd

City State Zip Code  
Windsor CT 06095

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Project Management Senior Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-5864-13-0

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 127.00

**TOTAL** This Period (last page this line number 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 / 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) James L. Nadler		Date of Receipt
	Mailing Address 143 N Shawnee Ridge Cir		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Spring	TX	77382
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Senior Director	Transaction ID: 20081002-5855-13-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="228.18"/>	
		Amount of Each Receipt this Period	<input type="text" value="11.50"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Nicoll		Date of Receipt
	Mailing Address 4 Bayview Dr		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plainview	NY	11803
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Senior Director	Transaction ID: 20081002-2476-13-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="538.60"/>	
		Amount of Each Receipt this Period	<input type="text" value="26.93"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeffery L. Novak		Date of Receipt
	Mailing Address 34 Sherman Dr		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Malvern	PA	19355
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CIGNA CORPORATION		Occupation Vice President Oper Effectiveness & Pr	Transaction ID: 20081002-11112-13-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="1700.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="85.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="123.43"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Eliana Nunez	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 120 Ridge Crest Cir	<b>Transaction ID:</b> 20081002-1451-13-0
	City State Zip Code Wethersfield CT 06109	Amount of Each Receipt this Period 15.63
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Project Management Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.84	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kathleen M. O'Neil	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 40 Chestnut Hill Rd	<b>Transaction ID:</b> 20081002-2002-13-0
	City State Zip Code Glastonbury CT 06033	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CIGNA CORPORATION	Occupation Accounting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) John Oates	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 2101 Sea Eagle View	<b>Transaction ID:</b> 20081002-17925-13-0
	City State Zip Code Austin TX 78738	Amount of Each Receipt this Period 46.15
	FEC ID number of contributing federal political committee. C	
Name of Employer CIGNA CORPORATION	Occupation Government Affairs Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.35	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	76.78
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 41 / 64  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Stephen C. Parham  
Mailing Address 201 Willoughby Blvd.  
City Greensboro State NC Zip Code 27408  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CIGNA CORPORATION Occupation Sales Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 10 / 02 / 2008  
Transaction ID: 20081002-12939-13-0  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
Charlene Parsons  
Mailing Address 1179 Colts Ln  
City Yardley State PA Zip Code 19067  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CIGNA CORPORATION Occupation Vice President Talent Optimization  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1800.00  
Date of Receipt 10 / 02 / 2008  
Transaction ID: 20081002-14650-13-0  
Amount of Each Receipt this Period 90.00

**C.** Full Name (Last, First, Middle Initial)  
Mark A. Parsons  
Mailing Address 4 Thistle Hollow  
City Avon State CT Zip Code 06001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Svp Reinsurance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 800.00  
Date of Receipt 10 / 02 / 2008  
Transaction ID: 20081002-561-13-0  
Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 155.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Raymond H. Perry	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 112 W Walnut Ave	<b>Transaction ID:</b> 20081002-2673-13-0
	City State Zip Code Moorestown NJ 08057	Amount of Each Receipt this Period 11.83
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Financial Analysis Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.25	

<b>B.</b>	Full Name (Last, First, Middle Initial) Carol Petren	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address The Ayer - #10 SW	<b>Transaction ID:</b> 20081002-17365-13-0
	City State Zip Code Philadelphia PA 19106-3581	Amount of Each Receipt this Period 192.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer ADM CEO Staff	Occupation E.V.P. Genl Counsel & Pub Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3840.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert D. Picinich	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 1096 Maple Hill Ln	<b>Transaction ID:</b> 20081002-2613-13-0
	City State Zip Code Malvern PA 19355	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>218.83</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 43 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles C. Pitts	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 622 Museum Drive	<b>Transaction ID:</b> 20081002-18308-13-0
	City State Zip Code Charlotte NC 28207	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	
Name of Employer CHC Middle Market Segment	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	

<b>B.</b>	Full Name (Last, First, Middle Initial) David M. Porcello	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 24 Magnolia Dr	<b>Transaction ID:</b> 20081002-1570-13-0
	City State Zip Code Suffield CT 06078	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CIGNA CORPORATION	Occupation Vice President Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michele A. Powers	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 318 Hurst Drive	<b>Transaction ID:</b> 20081002-11571-13-0
	City State Zip Code Old Hickory TN 37138	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	58.48
<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: (check only one)	PAGE 44 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas F. Prevost		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 8		
	Mailing Address 13 Deer Run		<b>Transaction ID:</b> 20081002-395-13-0		
	City Southwick	State MA	Zip Code 01077	Amount of Each Receipt this Period 19.25	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Aviation Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 385.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Jodi Prohovsky		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 8		
	Mailing Address 360 W Point Rd		<b>Transaction ID:</b> 20081002-2167-13-0		
	City Tonka Bay	State MN	Zip Code 55331	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA BEHAVIORAL HEALTH, INC.	Occupation Operations Senior Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Eduardo A. Ramos		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 8		
	Mailing Address 4241 Marie Circle		<b>Transaction ID:</b> 20081002-9553-13-0		
	City Doylestown	State PA	Zip Code 18902	Amount of Each Receipt this Period 18.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Marketing Product Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	62.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael J. Raybeck	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 622 Georgia Ave # 307	<b>Transaction ID:</b> 20081002-14566-13-0
	City State Zip Code Chattanooga TN 37402	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INT'L REHAB. ASSOCIATES, INC. Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William J. Reedy	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 1539 E Hackamore St	<b>Transaction ID:</b> 20081002-7758-13-0
	City State Zip Code Mesa AZ 85203	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC. Urgent Care Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Brett A. Reinholz	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 360 W Illinois St Apt 3a	<b>Transaction ID:</b> 20081002-5278-13-0
	City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Financial Analysis 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) .....	54.25
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 64  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Thomas B. Richards

Mailing Address 3 Scarborough Farms Rd

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Vice President Product Leader  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-794-13-0

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael G. Rogers

Mailing Address 131 Abbeywood Drive

City State Zip Code  
Nashville TN 37215

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Operations Director  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 309.19

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-8577-13-0

Amount of Each Receipt this Period  
15.87

**C.**

Full Name (Last, First, Middle Initial)  
Karen S. Rohan

Mailing Address PO Box 570

City State Zip Code  
North Falmouth MA 02556

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE President Grp, Dental, Vis & Pharm  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-172-13-0

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.87

**TOTAL** This Period (last page this line number 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 / 64  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 147 Old Gulph Rd

City Wynnewood State PA Zip Code 19096

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

Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Vice President Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1920.00

Date of Receipt 10 / 02 / 2008

**Transaction ID:** 20081002-12742-13-0

Amount of Each Receipt this Period 96.00

**B.** Full Name (Last, First, Middle Initial)  
William H. Roth

Mailing Address 91 Northington Drive

City Avon State CT Zip Code 06001

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

Name of Employer CIGNA CORPORATION Occupation Svp Segment Lead

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 02 / 2008

**Transaction ID:** 20081002-18449-13-0

Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Jean C. Rush

Mailing Address 73 Cidermill Hts

City North Granby State CT Zip Code 06060

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 02 / 2008

**Transaction ID:** 20081002-296-13-0

Amount of Each Receipt this Period 19.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► **165.25**

**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 48 / 64
<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard B. Salmon		Date of Receipt MM / DD / YYYY 10 / 02 / 2008		
	Mailing Address 5 Hawks Rdg		<b>Transaction ID:</b> 20081002-2346-13-0		
	City Avon	State CT	Zip Code 06001	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Medical Officer	Aggregate Year-to-Date 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) David N. Sasportas		Date of Receipt MM / DD / YYYY 10 / 02 / 2008		
	Mailing Address 125 Wadhams Rd		<b>Transaction ID:</b> 20081002-490-13-0		
	City Bloomfield	State CT	Zip Code 06002	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation App Development Director	Aggregate Year-to-Date 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank Sataline		Date of Receipt MM / DD / YYYY 10 / 02 / 2008		
	Mailing Address 18 Wyndham Ln		<b>Transaction ID:</b> 20081002-562-13-0		
	City Farmington	State CT	Zip Code 06032	Amount of Each Receipt this Period 85.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Vice President Senior Managing Director	Aggregate Year-to-Date 1700.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	135.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 64  
(check only one)

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

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

**A.**

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

Mailing Address 91 Trumbull Ln

City State Zip Code  
South Windsor CT 06074

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

Name of Employer Occupation  
CIGNA CORPORATION Compliance Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-743-13-0

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
David S. Scheibe

Mailing Address 400 Kings Highway

City State Zip Code  
Moorestown NJ 08057

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AM- ERICA Treasury Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-1658-13-0

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 1975 E. Belleview Ln.

City State Zip Code  
Greenwood Village CO 80121

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

Name of Employer Occupation  
CGI Sales Sales Director-Direct Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-19737-13-0

Amount of Each Receipt this Period  
19.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► **64.25**

**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 50 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael D. Slice	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 19422 N 73rd Ave	<b>Transaction ID:</b> 20081002-4657-13-0
	City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William J. Smith	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 269 Sunnybrook Rd	<b>Transaction ID:</b> 20081002-9688-13-0
	City State Zip Code Springfield PA 19064	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Vice President Bfo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Irene Sosnowski	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 764 N 26th St Fl 2	<b>Transaction ID:</b> 20081002-13235-13-0
	City State Zip Code Philadelphia PA 19130	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	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) .....	▶	84.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 64  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Donald R. Spelhaug

Mailing Address 5710 W Arrowhead Lakes Dr

City State Zip Code  
Glendale AZ 85308

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

Name of Employer  
CIGNA HEALTHCARE OF AZ, INC

Occupation  
Family Practice

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-7822-13-0

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Kenneth L. Sperling

Mailing Address 660 St. Johns Drive

City State Zip Code  
Orange CT 06477

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

Name of Employer  
CHC Senior Segment

Occupation  
Rvp Segment Lead

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-15803-13-0

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Marjorie G. Stein

Mailing Address 343 Brookway Rd

City State Zip Code  
Merion PA 19066

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

Name of Employer  
CIGNA CORPORATION

Occupation  
Employee Relations Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-2468-13-0

Amount of Each Receipt this Period

12.00

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

52.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 64  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Jennifer Stepp

Mailing Address 4144 Central Ave

City Indianapolis State IN Zip Code 46205

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 ▼ 654.85

Date of Receipt 10 / 02 / 2008  
Transaction ID: 20081002-5233-13-0  
Amount of Each Receipt this Period 6.89

**B.**

Full Name (Last, First, Middle Initial)  
Cathrin Stickney

Mailing Address 69 W 9th St

City New York State NY Zip Code 10011

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 ▼ 385.00

Date of Receipt 10 / 02 / 2008  
Transaction ID: 20081002-9832-13-0  
Amount of Each Receipt this Period 19.25

**C.**

Full Name (Last, First, Middle Initial)  
Andrew Sullivan

Mailing Address 720 Bristol Rd

City Wilmington State DE Zip Code 19803

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

Name of Employer LIFE INS. CO. OF NORTH AMERICA  
Occupation Rvp Segment Lead

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 10 / 02 / 2008  
Transaction ID: 20081002-11973-13-0  
Amount of Each Receipt this Period 85.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 111.14

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel M. Sullivan	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 108 Governors Way	<b>Transaction ID:</b> 20081002-1912-13-0
	City State Zip Code Brentwood TN 37027	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Gregory J. Sullivan	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 27 Sunny Heights Rd	<b>Transaction ID:</b> 20081002-14918-13-0
	City State Zip Code Granby CT 06035	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Shelly Swinford	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 5 Pinnacle Mountain Rd	<b>Transaction ID:</b> 20081002-5206-13-0
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 16.35
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operations Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.13	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>51.35</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 54 / 64

(check only one)

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

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

**A.**

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

Mailing Address 9556 E Cortez St

City State Zip Code  
Scottsdale AZ 85260

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

Name of Employer  
CT GENERAL LIFE INSURANCE  
CO

Occupation  
Rvp Segment Lead

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-10504-13-0

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Thackeray

Mailing Address 1334 Holly Hill Drive

City State Zip Code  
Franklin TN 37064

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

Name of Employer  
CT GENERAL LIFE INSURANCE  
CO

Occupation  
Account Manager-National Accounts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.61

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-248-13-0

Amount of Each Receipt this Period

13.15

**C.**

Full Name (Last, First, Middle Initial)  
Timothy M. Thomas

Mailing Address 334 E Orange Dr

City State Zip Code  
Phoenix AZ 85012

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

Name of Employer  
CT GENERAL LIFE INSURANCE  
CO

Occupation  
Senior Sales Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-8117-13-0

Amount of Each Receipt this Period

20.00

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

53.15

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 64

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Nancy Tucker

Mailing Address 522 E Commerce St

City State Zip Code  
Milford MI 48381

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

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

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 328.23

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-5902-13-0

Amount of Each Receipt this Period  
6.25

**B.**

Full Name (Last, First, Middle Initial)  
Joseph Turgeon

Mailing Address 15 Lyman Rd

City State Zip Code  
Bolton CT 06043

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

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

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

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-14717-13-0

Amount of Each Receipt this Period  
15.00

**C.**

Full Name (Last, First, Middle Initial)  
Alexander I. Ungerleider

Mailing Address Aimes Point

City State Zip Code  
West Haven CT 06516

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

Name of Employer Occupation  
CIGNA CORPORATION Segment Marketing Director

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 255.08

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

Transaction ID: 20081002-17047-13-0

Amount of Each Receipt this Period  
15.00

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

36.25

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 64  
(check only one)

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

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

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

Mailing Address Po Box 241

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CIGNA CORPORATION Compliance Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-862-13-0

Amount of Each Receipt this Period  
20.00

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

Mailing Address 1409 Vassar St

City State Zip Code  
Houston TX 77006

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 598.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-9713-13-0

Amount of Each Receipt this Period  
29.93

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

Mailing Address 510 Larkins Bridge Dr

City State Zip Code  
Downingtown PA 19335

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

Name of Employer Occupation  
CIGNA CORPORATION Financial Analysis Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** 20081002-11918-13-0

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **69.93**

**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 57 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph Wankerl	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	Mailing Address 514 Mount Vernon Rd	<b>Transaction ID:</b> 20081002-11493-13-0
	City State Zip Code Plantsville CT 06479	Amount of Each Receipt this Period 10.10
	FEC ID number of contributing federal political committee. <b>C</b>	
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>B.</b>	Full Name (Last, First, Middle Initial) John Watson	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	Mailing Address 215 Elm St	<b>Transaction ID:</b> 20081002-16308-13-0
	City State Zip Code Noank CT 06340	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	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>C.</b>	Full Name (Last, First, Middle Initial) Scott D. Watson	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	Mailing Address 1813 Shadywood Ct	<b>Transaction ID:</b> 20081002-5686-13-0
	City State Zip Code Chesterfield MO 63017	Amount of Each Receipt this Period 21.42
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 714.54	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	51.52
<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 58 / 64  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Christopher J. Whelan  
Mailing Address 585 Country Club Rd  
City Avon State CT Zip Code 06001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Financial Analysis Senior Director  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 10 / 02 / 2008  
Transaction ID: 20081002-14624-13-0  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Richard M. White  
Mailing Address 68 Longwood Dr  
City Portland State ME Zip Code 04102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Provider Contracting Director  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 10 / 02 / 2008  
Transaction ID: 20081002-2314-13-0  
Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Rebekah C. Whitehouse  
Mailing Address 2640 W Tulsa St  
City Chandler State AZ Zip Code 85224  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Vice President Marketing  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 10 / 02 / 2008  
Transaction ID: 20081002-11282-13-0  
Amount of Each Receipt this Period 20.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 64
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Lance Wilkes	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 6 Langley Park	<b>Transaction ID:</b> 20081002-10811-13-0
	City Farmington State CT Zip Code 06032	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Financial Strategy Senior Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Eric Witherspoon	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 509 Barrington Rd	<b>Transaction ID:</b> 20081002-6816-13-0
	City Signal Mountain State TN Zip Code 37377	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Underwriting Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bu Yang	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 121 High Wood Dr	<b>Transaction ID:</b> 20081002-10464-13-0
	City South Glastonbury State CT Zip Code 06073	Amount of Each Receipt this Period 21.15
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Architecture Senior Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>56.15</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 60 / 64	
	(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"/> 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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Young		Date of Receipt																					
	Mailing Address 18420 29th Avenue North		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	2		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		0	2		2	0	0	8														
	City	State	Zip Code		<b>Transaction ID:</b> 20081002-17051-13-0																			
	Plymouth	MN	55447																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer CHC Middle Market Sales		Occupation Account Director		<input type="text" value="20.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		<input type="text" value="380.00"/>																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="20.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="4755.13"/>

**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

<b>A.</b> Full Name (Last, First, Middle Initial) Allyson Schwartz for Congress <hr/> Mailing Address PO Box 2232 <hr/> City Jenkintown State PA Zip Code 19046 <hr/> Purpose of Disbursement 2008 General Candidate Name Allyson Y. Schwartz <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 50b7ca7e1e10c26b2b0 Date of Disbursement 10 / 07 / 2008
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Charlie Dent for Congress <hr/> Mailing Address PO Box 442 <hr/> City Allentown State PA Zip Code 18105 <hr/> Purpose of Disbursement 2008 General Candidate Name Charles W. Dent <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: a510c502148fb2ccf45 Date of Disbursement 10 / 07 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) John Shadeggs Friends <hr/> Mailing Address PO Box 45444 <hr/> City Phoenix State AZ Zip Code 85064 <hr/> Purpose of Disbursement 2008 General Candidate Name John Shadegg <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 03 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 730c16f8805d1ea867b Date of Disbursement 10 / 07 / 2008
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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)

PAGE 62 / 64

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) Mark Norris for Congress		Transaction ID: 10849-20608156919479	
	Mailing Address PO Box 381075		Date of Disbursement 10 / 13 / 2008	
City Germantown		State TN	Zip Code 38183	
Purpose of Disbursement Voided 9/16/08 Disbursement			Amount of Each Disbursement this Period -250.00	
Candidate Name Mark S. Norris			011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 07				

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

-250.00

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

4750.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<b>A.</b> Full Name (Last, First, Middle Initial) Douglas for Governor <hr/> Mailing Address Post Office Box 1414 <hr/> City Montpelier State VT Zip Code 05601 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: c326b3845b914da5037 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) House Democratic Campaign Committee <hr/> Mailing Address PO Box 2021 <hr/> City Augusta State ME Zip Code 04338-2021 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 0a2cd963dc87b1eb3fc Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Leadership for Maine's Future PAC <hr/> Mailing Address c/o Mary Ellen Tardy Post Office Box 476 <hr/> City Newport State ME Zip Code 04952-0476 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00449f56ba3a85d8be3 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 750.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

