

# 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  
Philadelphia PA 19192  
 Check if different than previously reported. (ACC)

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 \_\_\_\_\_ 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 05 01 2008 through 05 31 2008

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

Type or Print Name of Treasurer Mordecai Schwartz

Signature of Treasurer Electronically Filed by Mordecai Schwartz Date 06 12 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
CIGNA Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		12499.05
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	19593.62									
(c) Total Receipts (from Line 19) .....	24609.52	94554.09								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	44203.14	107053.14								
7. Total Disbursements (from Line 31) .....	15300.00	78150.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	28903.14	28903.14								
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
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	9674.85	27153.92
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	14934.67	65104.17
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	24609.52	92258.09
(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) .....	24609.52	92258.09
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)) .....	24609.52	94554.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	24609.52	94554.09

**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.....	10500.00	47500.00
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	600.00
(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	600.00
29. Other Disbursements.....	4800.00	30050.00
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))..	15300.00	78150.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15300.00	78150.00

**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) .....	24609.52	92258.09
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24609.52	91658.09
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: (check only one)	PAGE 6 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael B. Alexander		Date of Receipt	
	Mailing Address 252 North Main Street		M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080428-16536-23-32
	Doylestown	PA	18901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		26.93	
Name of Employer CBH Provider Oversight		Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 296.23		

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael B. Alexander		Date of Receipt	
	Mailing Address 252 North Main Street		M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080512-16483-23-33
	Doylestown	PA	18901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		26.93	
Name of Employer CBH Provider Oversight		Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 296.23		

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael B. Alexander		Date of Receipt	
	Mailing Address 252 North Main Street		M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080526-16434-23-32
	Doylestown	PA	18901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		26.93	
Name of Employer CBH Provider Oversight		Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 296.23		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.79
<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 7 / 85  
(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)  
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 ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-404-23-32

Amount of Each Receipt this Period  
19.25

**B.**

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 ▼ 564.33

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-7278-23-32

Amount of Each Receipt this Period  
50.86

**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 ▼ 564.33

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-7268-23-33

Amount of Each Receipt this Period  
50.86

**SUBTOTAL** of Receipts This Page (optional) ..... ► 120.97

**TOTAL** This Period (last page this line 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 / 85  
(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)  
James Austin

Mailing Address 394 W Remington Dr

City Chandler State AZ Zip Code 85248

FEC ID number of contributing federal political committee. C

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 564.33

Date of Receipt 05 / 29 / 2008

**Transaction ID:** 20080526-7248-23-32

Amount of Each Receipt this Period 59.67

**B.**

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 ▼ 935.00

Date of Receipt 05 / 01 / 2008

**Transaction ID:** 20080428-16640-23-32

Amount of Each Receipt this Period 85.00

**C.**

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 ▼ 935.00

Date of Receipt 05 / 15 / 2008

**Transaction ID:** 20080512-16586-23-33

Amount of Each Receipt this Period 85.00

**SUBTOTAL** of Receipts This Page (optional) ..... 229.67

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 85  
(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 State Zip Code  
Duluth GA 30097

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-16536-23-32

Amount of Each Receipt this Period  
85.00

**B.**

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

Mailing Address 2126 Inverness Ln

City State Zip Code  
Berwyn PA 19312

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

Name of Employer Occupation  
CIGNA CORPORATION Executive Vice President Chief Financi

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-5724-23-32

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephanie Bellamy

Mailing Address 7260 Wissahickon Avenue

City State Zip Code  
Philadelphia PA 19119

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

Name of Employer Occupation  
FIN Corp Development Financial Analysis Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-4006-23-32

Amount of Each Receipt this Period  
25.00

**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 10 / 85  
(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)  
Stephanie Bellamy

Mailing Address 7260 Wissahickon Avenue

City Philadelphia State PA Zip Code 19119

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

Name of Employer: FIN Corp Development Occupation: Financial Analysis Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 05 / 15 / 2008

Transaction ID: 20080512-3999-23-33

Amount of Each Receipt this Period: 25.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephanie Bellamy

Mailing Address 7260 Wissahickon Avenue

City Philadelphia State PA Zip Code 19119

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

Name of Employer: FIN Corp Development Occupation: Financial Analysis Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 05 / 29 / 2008

Transaction ID: 20080526-3992-23-32

Amount of Each Receipt this Period: 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Kim Bimestefer

Mailing Address 11 Colts Run Rd

City Princeton State NJ Zip Code 08540

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 ▼ 275.00

Date of Receipt: 05 / 01 / 2008

Transaction ID: 20080428-11528-23-32

Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 85
	<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) Kim Bimestefer	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 11 Colts Run Rd	<b>Transaction ID:</b> 20080512-11498-23-33
	City State Zip Code Princeton NJ 08540	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 General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kim Bimestefer	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 11 Colts Run Rd	<b>Transaction ID:</b> 20080526-11466-23-32
	City State Zip Code Princeton NJ 08540	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 General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ellen C. Bonner	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 1403 Greenwood Avenue	<b>Transaction ID:</b> 20080428-19573-23-32
	City State Zip Code Nashville TN 37206	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer L&PA Technology & Business Law	Occupation Senior Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 85
	<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 Nashville State TN Zip Code 37206

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 15 / 2008

**Transaction ID:** 20080512-19500-23-33

Amount of Each Receipt this Period 50.00

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

Mailing Address 1403 Greenwood Avenue

City Nashville State TN Zip Code 37206

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 29 / 2008

**Transaction ID:** 20080526-19425-23-32

Amount of Each Receipt this Period 50.00

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

Mailing Address 7022 W Kimberly Way

City Glendale State AZ Zip Code 85308

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

Name of Employer CIGNA HEALTHCARE OF AZ, INC Occupation Otologyngologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 242.44

Date of Receipt 05 / 15 / 2008

**Transaction ID:** 20080512-8135-23-33

Amount of Each Receipt this Period 22.04

**SUBTOTAL** of Receipts This Page (optional) ..... ► **122.04**

**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 13 / 85  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Paul B. Borgesen  
 Mailing Address 7022 W Kimberly Way  
 City State Zip Code  
 Glendale AZ 85308  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 9 / 2 0 0 8  
**Transaction ID:** 20080526-8116-23-32  
 Amount of Each Receipt this Period  
 22.04  
 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) ▼ 242.44

**B.** Full Name (Last, First, Middle Initial)  
Brett C. Browchuk  
 Mailing Address 385 Deercliff Road  
 City State Zip Code  
 Avon CT 06001  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 1 / 2 0 0 8  
**Transaction ID:** 20080428-19471-23-32  
 Amount of Each Receipt this Period  
 96.00  
 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) ▼ 1056.00

**C.** Full Name (Last, First, Middle Initial)  
Brett C. Browchuk  
 Mailing Address 385 Deercliff Road  
 City State Zip Code  
 Avon CT 06001  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 5 / 2 0 0 8  
**Transaction ID:** 20080512-19399-23-33  
 Amount of Each Receipt this Period  
 96.00  
 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) ▼ 1056.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 214.04  
**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 14 / 85  
(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)  
Brett C. Browchuk

Mailing Address 385 Deercliff Road

City Avon State CT Zip Code 06001

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

Name of Employer CIGNA Corporation Occupation Svp Service Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1056.00

Date of Receipt 05 / 29 / 2008  
Transaction ID: 20080526-19324-23-32  
Amount of Each Receipt this Period 96.00

**B.**

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

Mailing Address 3651 N Leavitt St

City Chicago State IL Zip Code 60618

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 ▼ 461.95

Date of Receipt 05 / 01 / 2008  
Transaction ID: 20080428-5842-23-32  
Amount of Each Receipt this Period 115.87

**C.**

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

Mailing Address 3651 N Leavitt St

City Chicago State IL Zip Code 60618

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 ▼ 461.95

Date of Receipt 05 / 15 / 2008  
Transaction ID: 20080512-5829-23-33  
Amount of Each Receipt this Period 9.62

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **221.49**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 85
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) M. Buckley	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 3651 N Leavitt St	<b>Transaction ID:</b> 20080526-5818-23-32
	City State Zip Code Chicago IL 60618	Amount of Each Receipt this Period 26.86
	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 ▼ 461.95	

<b>B.</b>	Full Name (Last, First, Middle Initial) Timothy D. Buckley	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 611 Shipton Lane	<b>Transaction ID:</b> 20080428-18946-23-32
	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 ▼ 319.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Timothy D. Buckley	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 611 Shipton Lane	<b>Transaction ID:</b> 20080512-18880-23-33
	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 ▼ 319.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>84.86</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 16 / 85  
(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)  
Timothy D. Buckley

Mailing Address 611 Shipton Lane

City State Zip Code  
Bryn Mawr PA 19010

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

Name of Employer Occupation  
CIGNA Internation Vice President Bfo International

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 319.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-18809-23-32

Amount of Each Receipt this Period  
29.00

**B.**

Full Name (Last, First, Middle Initial)  
Rudolph C. Cane

Mailing Address 4619 E White Aster St

City State Zip Code  
Phoenix AZ 85044

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-3998-23-32

Amount of Each Receipt this Period  
19.25

**C.**

Full Name (Last, First, Middle Initial)  
Charles Carlson

Mailing Address 404 Wild Iris Lane

City State Zip Code  
Powder Springs GA 30127

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

Name of Employer Occupation  
CHC Natl Southeast Sales Market Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-19322-23-32

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **68.25**

**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 17 / 85  
(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 ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-890-23-32

Amount of Each Receipt this Period  
25.00

**B.**

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 ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-891-23-33

Amount of Each Receipt this Period  
25.00

**C.**

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 ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-888-23-32

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 85  
(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)  
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 ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

**Transaction ID:** 20080526-11291-23-32

Amount of Each Receipt this Period  
20.00

**B.** 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 ▼  
990.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

**Transaction ID:** 20080428-484-23-32

Amount of Each Receipt this Period  
90.00

**C.** 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 ▼  
990.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 8

**Transaction ID:** 20080512-484-23-33

Amount of Each Receipt this Period  
90.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 85
	<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) Robert F. Clark		Date of Receipt
	Mailing Address 2 Reed Hill Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Granby	CT	06035
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080526-482-23-32
Name of Employer CIGNA CORPORATION		Occupation Vice President Coli	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"/> 90.00
		<input type="text"/> 990.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stuart J. Cohen		Date of Receipt
	Mailing Address 99 Hummingbird Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Berlin	CT	06037
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080526-15399-23-32
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Occupation Learning 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"/> 20.00
		<input type="text"/> 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher M. Coloian		Date of Receipt
	Mailing Address 36 Ruth Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 1 / 2 0 0 8
	City	State	Zip Code
	Malvern	PA	19355
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080428-11734-23-32
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Clinical Program 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"/> 25.00
		<input type="text"/> 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 135.00
<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 20 / 85

(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 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 ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 8

Transaction ID: 20080512-11703-23-33

Amount of Each Receipt this Period

25.00

B.

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 ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: 20080526-11671-23-32

Amount of Each Receipt this Period

25.00

C.

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 Cigna Healthcare

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: 20080428-593-23-32

Amount of Each Receipt this Period

120.00

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

170.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 85

(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 President Cigna Healthcare  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 8

Transaction ID: 20080512-593-23-33

Amount of Each Receipt this Period

120.00

**B.**

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 President Cigna Healthcare  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: 20080526-590-23-32

Amount of Each Receipt this Period

120.00

**C.**

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

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 Financial Analysis Senior Director  
CO

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

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: 20080526-9235-23-32

Amount of Each Receipt this Period

20.00

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

260.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 85
	<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) Christopher J. Coxon	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 47 Leigh Gate Road	<b>Transaction ID:</b> 20080526-12058-23-32
	City State Zip Code Glastonbury CT 06033-4174	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Senior Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Andrew D. Crooks	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 323 Turtle Trl	<b>Transaction ID:</b> 20080428-11345-23-32
	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 ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Andrew D. Crooks	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 323 Turtle Trl	<b>Transaction ID:</b> 20080512-11315-23-33
	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 ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 85  
(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)  
Andrew D. Crooks

Mailing Address 323 Turtle Trl

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 General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-11284-23-32

Amount of Each Receipt this Period  
25.00

**B.**

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

Mailing Address 6122 Mccallum St

City State Zip Code  
Philadelphia PA 19144

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Chief Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-286-23-32

Amount of Each Receipt this Period  
25.00

**C.**

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

Mailing Address 6122 Mccallum St

City State Zip Code  
Philadelphia PA 19144

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Chief Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-286-23-33

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 85
	<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) Johannes M. De Jong		Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 6122 Mccallum St		<b>Transaction ID:</b> 20080526-285-23-32
	City Philadelphia	State PA	Zip Code 19144
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer CIGNA CORPORATION	Occupation Vice President Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Edwin J. Detrick		Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 17 Swallow Rd		<b>Transaction ID:</b> 20080526-3262-23-32
	City Holland	State PA	Zip Code 18966
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
	Name of Employer CIGNA CORPORATION	Occupation Vice President Investor Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Keith Dixon		Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 1715 Morgan Ave S		<b>Transaction ID:</b> 20080428-7873-23-32
	City Minneapolis	State MN	Zip Code 55405
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer CIGNA BEHAVIORAL HEALTH, INC.	Occupation President Behavioral Health	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 85
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Keith Dixon	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 1715 Morgan Ave S	<b>Transaction ID:</b> 20080512-7860-23-33
	City State Zip Code Minneapolis MN 55405	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 President Behavioral Health Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Keith Dixon	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 1715 Morgan Ave S	<b>Transaction ID:</b> 20080526-7839-23-32
	City State Zip Code Minneapolis MN 55405	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 President Behavioral Health Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeannine Doherty	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 1901 E Royal Palm Rd	<b>Transaction ID:</b> 20080428-41-23-32
	City State Zip Code Phoenix AZ 85020	Amount of Each Receipt this Period 6.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.43	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	56.25
<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 26 / 85  
(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)  
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  
CT GENERAL LIFE INSURANCE  
CO

Occupation  
Senior Account Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.43

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-40-23-33

Amount of Each Receipt this Period  
6.25

**B.**

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  
CT GENERAL LIFE INSURANCE  
CO

Occupation  
Senior Account Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.43

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-40-23-32

Amount of Each Receipt this Period  
10.03

**C.**

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  
CT GENERAL LIFE INSURANCE  
CO

Occupation  
General Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-8221-23-32

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **41.28**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 85  
(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)  
Daryl W. Edmonds

Mailing Address 9211 Sand Hill St

City Highlands Ranch State CO Zip Code 80126

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 ▼ 275.00

Date of Receipt 05 / 15 / 2008

**Transaction ID:** 20080512-8207-23-33

Amount of Each Receipt this Period 25.00

**B.**

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

Mailing Address 9211 Sand Hill St

City Highlands Ranch State CO Zip Code 80126

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 ▼ 275.00

Date of Receipt 05 / 29 / 2008

**Transaction ID:** 20080526-8188-23-32

Amount of Each Receipt this Period 25.00

**C.**

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

Mailing Address 8228 Academy Rd

City Ellicott City State MD Zip Code 21043

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2008

**Transaction ID:** 20080526-130-23-32

Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 70.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 85  
(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)  
Robert Fair

Mailing Address 1758 Boulevard

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 Investment Managing Director  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

**Transaction ID:** 20080526-281-23-32

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 817 Wheat Field Drive

City State Zip Code  
Waxhaw NC 28173

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

Name of Employer Occupation  
CHC Sales Effectives Staf- Account Director  
fing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

**Transaction ID:** 20080526-16605-23-32

Amount of Each Receipt this Period  
19.25

**C.**

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

Mailing Address 15 Dilaj Dr

City State Zip Code  
Columbia CT 06237

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

**Transaction ID:** 20080526-2386-23-32

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **59.25**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 85
	<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)  
Karen E. Ferrell

Mailing Address 1005 Chesson Ct

City State Zip Code  
Alpharetta GA 30022

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Svp Contr Provid Netwk Med Mgt  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-14740-23-32

Amount of Each Receipt this Period  
85.00

**B.**

Full Name (Last, First, Middle Initial)  
Karen E. Ferrell

Mailing Address 1005 Chesson Ct

City State Zip Code  
Alpharetta GA 30022

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Svp Contr Provid Netwk Med Mgt  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-14698-23-33

Amount of Each Receipt this Period  
85.00

**C.**

Full Name (Last, First, Middle Initial)  
Karen E. Ferrell

Mailing Address 1005 Chesson Ct

City State Zip Code  
Alpharetta GA 30022

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Svp Contr Provid Netwk Med Mgt  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-14656-23-32

Amount of Each Receipt this Period  
85.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **255.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 85  
(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)  
David Ferriss

Mailing Address 7 Woods Lane

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 Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-10569-23-32

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
David Ferriss

Mailing Address 7 Woods Lane

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 Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-10543-23-33

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
David Ferriss

Mailing Address 7 Woods Lane

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 Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-10511-23-32

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 31 / 85</span> (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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Scott M. Filiault</p> <p>Mailing Address 135 Timrod Rd</p> <p>City State Zip Code Manchester CT 06040</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CT GENERAL LIFE INSURANCE Operations Senior Director CO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">220.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 29 / 2008</span></p> <p><b>Transaction ID:</b> 20080526-297-23-32</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">20.00</span></p>
---	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Richard H. Forde</p> <p>Mailing Address 5 Brighton Ln</p> <p>City State Zip Code Simsbury CT 06070</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CT GENERAL LIFE INSURANCE Svp Chief Investment Officer CO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">990.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 01 / 2008</span></p> <p><b>Transaction ID:</b> 20080428-1116-23-32</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">90.00</span></p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Richard H. Forde</p> <p>Mailing Address 5 Brighton Ln</p> <p>City State Zip Code Simsbury CT 06070</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CT GENERAL LIFE INSURANCE Svp Chief Investment Officer CO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">990.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 15 / 2008</span></p> <p><b>Transaction ID:</b> 20080512-1117-23-33</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">90.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">200.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 85
	<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 H. Forde		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 5 Brighton Ln		<b>Transaction ID:</b> 20080526-1113-23-32		
	City Simsbury	State CT	Zip Code 06070	Amount of Each Receipt this Period 90.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Svp Chief Investment Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 990.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert S. Fry		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 1004 Beech Bay Rd		<b>Transaction ID:</b> 20080526-3664-23-32		
	City Poplar Grove	State IL	Zip Code 61065	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 Sales Director-Sales Mgt			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas Garvey		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 31 Lakeshore Dr		<b>Transaction ID:</b> 20080526-2577-23-32		
	City Rockaway	State NJ	Zip Code 07866	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 General Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.75			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	129.25
<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 33 / 85
	<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 J. Giannoni	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 2030 James Farm Rd	<b>Transaction ID:</b> 20080428-5240-23-32
	City State Zip Code Stratford CT 06614	Amount of Each Receipt this Period 11.21
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.36	

<b>B.</b>	Full Name (Last, First, Middle Initial) David J. Giannoni	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 2030 James Farm Rd	<b>Transaction ID:</b> 20080512-5228-23-33
	City State Zip Code Stratford CT 06614	Amount of Each Receipt this Period 6.73
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.36	

<b>C.</b>	Full Name (Last, First, Middle Initial) David J. Giannoni	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 2030 James Farm Rd	<b>Transaction ID:</b> 20080526-5218-23-32
	City State Zip Code Stratford CT 06614	Amount of Each Receipt this Period 6.73
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Senior Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.36	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>24.67</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 34 / 85  
(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)  
Paul J. Gontarek

Mailing Address 7442 Devon St

City Philadelphia State PA Zip Code 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 ▼ 275.00

Date of Receipt: 05 / 01 / 2008  
**Transaction ID:** 20080428-3822-23-32  
 Amount of Each Receipt this Period: 25.00

**B.**

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

Mailing Address 7442 Devon St

City Philadelphia State PA Zip Code 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 ▼ 275.00

Date of Receipt: 05 / 15 / 2008  
**Transaction ID:** 20080512-3815-23-33  
 Amount of Each Receipt this Period: 25.00

**C.**

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

Mailing Address 7442 Devon St

City Philadelphia State PA Zip Code 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 ▼ 275.00

Date of Receipt: 05 / 29 / 2008  
**Transaction ID:** 20080526-3808-23-32  
 Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 85
	<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) Richard Gray		Date of Receipt	
	Mailing Address 138 Ballard Dr		M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080512-2470-23-33
	West Hartford	CT	06119	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer CIGNA CORPORATION		Occupation Strat and Business Develop Senior Dire		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Gray		Date of Receipt	
	Mailing Address 138 Ballard Dr		M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080526-2467-23-32
	West Hartford	CT	06119	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer CIGNA CORPORATION		Occupation Strat and Business Develop Senior Dire		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Craig J. Guiffre		Date of Receipt	
	Mailing Address 17 Pheasant Lane		M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080428-19816-23-32
	Scotch Plains	NJ	07076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		90.00	
Name of Employer CGI CGI Executive Staff		Occupation Vice President Sales and Emerging Mkts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 990.00		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 85
	<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) Craig J. Guiffre	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 17 Pheasant Lane	<b>Transaction ID:</b> 20080512-19740-23-33
	City State Zip Code Scotch Plains NJ 07076	Amount of Each Receipt this Period 90.00
	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 990.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Craig J. Guiffre	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 17 Pheasant Lane	<b>Transaction ID:</b> 20080526-19660-23-32
	City State Zip Code Scotch Plains NJ 07076	Amount of Each Receipt this Period 90.00
	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 990.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Douglas R. Hadley	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 126 Hopmeadow Street	<b>Transaction ID:</b> 20080428-8602-23-32
	City State Zip Code Weatogue CT 06089	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INT'L REHAB. ASSOCIATES, INC. Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	205.00
<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 37 / 85  
(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)  
Douglas R. Hadley

Mailing Address 126 Hopmeadow Street

City Weatogue State CT Zip Code 06089

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 05 / 15 / 2008  
**Transaction ID: 20080512-8585-23-33**  
Amount of Each Receipt this Period 25.00

**B.**

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

Mailing Address 126 Hopmeadow Street

City Weatogue State CT Zip Code 06089

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 05 / 29 / 2008  
**Transaction ID: 20080526-8563-23-32**  
Amount of Each Receipt this Period 25.00

**C.**

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

Mailing Address 1005 Bent Rd

City Media State PA Zip Code 19063

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

Name of Employer CIGNA CORPORATION Occupation Chairman and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 05 / 01 / 2008  
**Transaction ID: 20080428-3738-23-32**  
Amount of Each Receipt this Period 192.30

**SUBTOTAL** of Receipts This Page (optional) ..... ► 242.30

**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 38 / 85
	<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) H. Hanway		Date of Receipt
	Mailing Address 1005 Bent Rd		<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Media	PA	19063
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080512-3731-23-33
Name of Employer CIGNA CORPORATION		Occupation Chairman and Chief Executive Officer	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="2115.30"/>	<input type="text" value="192.30"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) H. Hanway		Date of Receipt
	Mailing Address 1005 Bent Rd		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Media	PA	19063
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080526-3724-23-32
Name of Employer CIGNA CORPORATION		Occupation Chairman and Chief Executive Officer	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="2115.30"/>	<input type="text" value="192.30"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) G. Hoagland		Date of Receipt
	Mailing Address 10012 Rough Run Court		<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Fairfax	VA	22039
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080428-19392-23-32
Name of Employer L&PA CIGNA-General Counsel		Occupation Vice President Government Affairs	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="770.00"/>	<input type="text" value="70.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="454.60"/>
<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 39 / 85  
(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)  
G. Hoagland

Mailing Address 10012 Rough Run Court

City State Zip Code  
Fairfax VA 22039

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

Name of Employer L&PA CIGNA-General Counsel Occupation Vice President Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 770.00

Date of Receipt 05 / 15 / 2008  
**Transaction ID: 20080512-19322-23-33**  
Amount of Each Receipt this Period 70.00

**B.**

Full Name (Last, First, Middle Initial)  
G. Hoagland

Mailing Address 10012 Rough Run Court

City State Zip Code  
Fairfax VA 22039

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

Name of Employer L&PA CIGNA-General Counsel Occupation Vice President Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 770.00

Date of Receipt 05 / 29 / 2008  
**Transaction ID: 20080526-19249-23-32**  
Amount of Each Receipt this Period 70.00

**C.**

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

Mailing Address 135 Brackett Rd

City State Zip Code  
Rye NH 03870

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.64

Date of Receipt 05 / 29 / 2008  
**Transaction ID: 20080526-957-23-32**  
Amount of Each Receipt this Period 19.24

**SUBTOTAL** of Receipts This Page (optional) ..... ► 159.24

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 85

(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)  
Dale Hovey

Mailing Address 6 Westborough Dr

City State Zip Code  
Weatogue CT 06089

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

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

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

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: 20080526-1166-23-32

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert J. Hughes

Mailing Address 120 Shandon Pl

City State Zip Code  
Malvern PA 19355

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AM- Svp General Manager, Intl  
ERICA

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

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: 20080526-1678-23-32

Amount of Each Receipt this Period

20.00

**C.**

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

Mailing Address 5 Corvette Ct

City State Zip Code  
New Castle DE 19720

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

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

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: 20080428-152-23-32

Amount of Each Receipt this Period

25.00

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

65.00

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

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

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

FOR LINE NUMBER: PAGE 41 / 85  
(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)  
Abdul-Alim Issa  
Mailing Address 5 Corvette Ct  
City New Castle State DE Zip Code 19720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Underwriting Director  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00  
Date of Receipt 05 / 15 / 2008  
Transaction ID: 20080512-152-23-33  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
Abdul-Alim Issa  
Mailing Address 5 Corvette Ct  
City New Castle State DE Zip Code 19720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Underwriting Director  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00  
Date of Receipt 05 / 29 / 2008  
Transaction ID: 20080526-151-23-32  
Amount of Each Receipt this Period 25.00

**C.** Full Name (Last, First, Middle Initial)  
Malcolm D. Jackson  
Mailing Address 28 Cedar Meadow Lane  
City Media State PA Zip Code 19063  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CIGNA CORPORATION Occupation Business Unit I.T. Senior Director  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 297.00  
Date of Receipt 05 / 01 / 2008  
Transaction ID: 20080428-17970-23-32  
Amount of Each Receipt this Period 27.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 77.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 85  
(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)  
Malcolm D. Jackson

Mailing Address 28 Cedar Meadow Lane

City State Zip Code  
Media PA 19063

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

Name of Employer Occupation  
CIGNA CORPORATION Business Unit I.T. Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 297.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-17907-23-33

Amount of Each Receipt this Period  
27.00

**B.**

Full Name (Last, First, Middle Initial)  
Malcolm D. Jackson

Mailing Address 28 Cedar Meadow Lane

City State Zip Code  
Media PA 19063

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

Name of Employer Occupation  
CIGNA CORPORATION Business Unit I.T. Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 297.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-17842-23-32

Amount of Each Receipt this Period  
27.00

**C.**

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

Mailing Address 690 Bradford St

City State Zip Code  
Pasadena CA 91105

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-8823-23-32

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 79.00

**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 43 / 85  
(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 S. Jameson

Mailing Address 690 Bradford St

City Pasadena State CA Zip Code 91105

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 15 / 2008

**Transaction ID:** 20080512-8804-23-33

Amount of Each Receipt this Period 25.00

**B.**

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

Mailing Address 690 Bradford St

City Pasadena State CA Zip Code 91105

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 29 / 2008

**Transaction ID:** 20080526-8780-23-32

Amount of Each Receipt this Period 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Scott Josephs

Mailing Address 403 Tramore Dr

City Chapel Hill State NC Zip Code 27516

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Medical Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 01 / 2008

**Transaction ID:** 20080428-9576-23-32

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 85
	<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) Scott Josephs	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 403 Tramore Dr	<b>Transaction ID:</b> 20080512-9555-23-33
	City State Zip Code Chapel Hill NC 27516	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 ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Scott Josephs	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 403 Tramore Dr	<b>Transaction ID:</b> 20080526-9530-23-32
	City State Zip Code Chapel Hill NC 27516	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 ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Benjamin W. Katz	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 3603a Happy Valley Rd	<b>Transaction ID:</b> 20080428-9030-23-32
	City State Zip Code Lafayette CA 94549	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CIGNA HEALTHCARE OF CA, INC.	Occupation Provider Contracting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 354.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<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 45 / 85  
(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)  
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, INC. Provider Contracting Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 354.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-9011-23-33

Amount of Each Receipt this Period  
50.00

**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, INC. Provider Contracting Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 354.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-8986-23-32

Amount of Each Receipt this Period  
50.00

**C.**

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 ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-16927-23-32

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **120.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 85
	<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) William P. Lawless	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 509 S Bay Shore Blvd	<b>Transaction ID:</b> 20080526-2374-23-32
	City State Zip Code Gilbert AZ 85233	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 Family Practice	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher R. Loomis	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 909 Overton Ave	<b>Transaction ID:</b> 20080526-5958-23-32
	City State Zip Code Yardley PA 19067	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Association Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Maureen Macinnis	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 65 Joanna Way	<b>Transaction ID:</b> 20080526-17918-23-32
	City State Zip Code Short Hills NJ 07078	Amount of Each Receipt this Period 19.25
	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.75	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 85

(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)

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: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 209.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: 20080526-329-23-32

Amount of Each Receipt this Period  
19.00

**B.**

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: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 232.65

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 8

Transaction ID: 20080512-15596-23-33

Amount of Each Receipt this Period  
21.15

**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: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 232.65

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: 20080526-15549-23-32

Amount of Each Receipt this Period  
21.15

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

61.30

**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 48 / 85
	<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) Thomas J. Martel		Date of Receipt MM / DD / YYYY 05 / 15 / 2008		
	Mailing Address 23 Tack Ct		<b>Transaction ID:</b> 20080512-13464-23-33		
	City Edgewater	State MD	Zip Code 21037	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 General Manager	Aggregate Year-to-Date 250.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas J. Martel		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 23 Tack Ct		<b>Transaction ID:</b> 20080526-13424-23-32		
	City Edgewater	State MD	Zip Code 21037	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 General Manager	Aggregate Year-to-Date 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Kymberly P. Miranda		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 5633 Nw 88th Ter		<b>Transaction ID:</b> 20080526-6006-23-32		
	City Coral Springs	State FL	Zip Code 33067	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 Account Manager-National Accounts	Aggregate Year-to-Date 220.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 85  
(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 ▼  
1100.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-14399-23-32

Amount of Each Receipt this Period  
100.00

**B.**

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 ▼  
1100.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-14361-23-33

Amount of Each Receipt this Period  
100.00

**C.**

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 ▼  
1100.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-14320-23-32

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 85
	<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 Nicoll		Date of Receipt
	Mailing Address 4 Bayview Dr		<input type="text" value="05"/> / <input type="text" value="01"/> / <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: 20080428-2528-23-32
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="296.23"/>	
		Amount of Each Receipt this Period	<input type="text" value="26.93"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Nicoll		Date of Receipt
	Mailing Address 4 Bayview Dr		<input type="text" value="05"/> / <input type="text" value="15"/> / <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: 20080512-2523-23-33
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="296.23"/>	
		Amount of Each Receipt this Period	<input type="text" value="26.93"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel Nicoll		Date of Receipt
	Mailing Address 4 Bayview Dr		<input type="text" value="05"/> / <input type="text" value="29"/> / <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: 20080526-2520-23-32
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="296.23"/>	
		Amount of Each Receipt this Period	<input type="text" value="26.93"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="80.79"/>
<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 51 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.**

Full Name (Last, First, Middle Initial)  
Jeffery L. Novak

Mailing Address 34 Sherman Dr

City Malvern State PA Zip Code 19355

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

Name of Employer CIGNA CORPORATION Occupation Vice President Oper Effectiveness & Pr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt 05 / 01 / 2008

Transaction ID: 20080428-11367-23-32

Amount of Each Receipt this Period 85.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffery L. Novak

Mailing Address 34 Sherman Dr

City Malvern State PA Zip Code 19355

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

Name of Employer CIGNA CORPORATION Occupation Vice President Oper Effectiveness & Pr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt 05 / 15 / 2008

Transaction ID: 20080512-11337-23-33

Amount of Each Receipt this Period 85.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffery L. Novak

Mailing Address 34 Sherman Dr

City Malvern State PA Zip Code 19355

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

Name of Employer CIGNA CORPORATION Occupation Vice President Oper Effectiveness & Pr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt 05 / 29 / 2008

Transaction ID: 20080526-11306-23-32

Amount of Each Receipt this Period 85.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 255.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 85
	<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) Charlene Parsons		Date of Receipt
	Mailing Address 1179 Colts Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 01 / 2008
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080428-14983-23-32
Name of Employer CIGNA CORPORATION		Occupation Vice President Talent Optimization	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"/> 90.00
		<input type="text"/> 990.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charlene Parsons		Date of Receipt
	Mailing Address 1179 Colts Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 15 / 2008
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080512-14941-23-33
Name of Employer CIGNA CORPORATION		Occupation Vice President Talent Optimization	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"/> 90.00
		<input type="text"/> 990.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Charlene Parsons		Date of Receipt
	Mailing Address 1179 Colts Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 29 / 2008
	City	State	Zip Code
	Yardley	PA	19067
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080526-14899-23-32
Name of Employer CIGNA CORPORATION		Occupation Vice President Talent Optimization	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"/> 90.00
		<input type="text"/> 990.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 270.00
<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 53 / 85

(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)  
Mark A. Parsons

Mailing Address 4 Thistle Hollow

City State Zip Code  
Avon CT 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 ▼  
440.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: 20080428-578-23-32

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)  
Mark A. Parsons

Mailing Address 4 Thistle Hollow

City State Zip Code  
Avon CT 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 ▼  
440.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 8

Transaction ID: 20080512-578-23-33

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark A. Parsons

Mailing Address 4 Thistle Hollow

City State Zip Code  
Avon CT 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 ▼  
440.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: 20080526-575-23-32

Amount of Each Receipt this Period

40.00

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

120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) John R. Perlstein		Date of Receipt MM / DD / YYYY 05 / 01 / 2008		
	Mailing Address 19 Clover Ln		<b>Transaction ID:</b> 20080428-2088-23-32		
	City Manchester	State CT	Zip Code 06040	Amount of Each Receipt this Period 85.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION	Occupation Vice President Chief Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 935.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) John R. Perlstein		Date of Receipt MM / DD / YYYY 05 / 15 / 2008		
	Mailing Address 19 Clover Ln		<b>Transaction ID:</b> 20080512-2086-23-33		
	City Manchester	State CT	Zip Code 06040	Amount of Each Receipt this Period 85.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION	Occupation Vice President Chief Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 935.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) John R. Perlstein		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 19 Clover Ln		<b>Transaction ID:</b> 20080526-2084-23-32		
	City Manchester	State CT	Zip Code 06040	Amount of Each Receipt this Period 85.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION	Occupation Vice President Chief Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 935.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	255.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 85
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Carol Petren	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address The Ayer - #10 SW	<b>Transaction ID:</b> 20080428-17876-23-32
	City Philadelphia State PA Zip Code 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 ▼ 2112.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Carol Petren	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address The Ayer - #10 SW	<b>Transaction ID:</b> 20080512-17815-23-33
	City Philadelphia State PA Zip Code 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 ▼ 2112.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Carol Petren	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address The Ayer - #10 SW	<b>Transaction ID:</b> 20080526-17750-23-32
	City Philadelphia State PA Zip Code 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 ▼ 2112.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>576.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 85
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles C. Pitts		Date of Receipt	
	Mailing Address 622 Museum Drive		M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080526-18750-23-32
	Charlotte	NC	28207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		19.23	
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 ▼ 211.53		

<b>B.</b>	Full Name (Last, First, Middle Initial) Michele A. Powers		Date of Receipt	
	Mailing Address 318 Hurst Drive		M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080526-11772-23-32
	Old Hickory	TN	37138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		19.25	
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 ▼ 211.75		

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas F. Prevost		Date of Receipt	
	Mailing Address 13 Deer Run		M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080526-406-23-32
	Southwick	MA	01077	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		19.25	
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 ▼ 211.75		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	57.73
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 85  
(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)  
Jodi Prohofsky

Mailing Address 360 W Point Rd

City State Zip Code  
Tonka Bay MN 55331

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

Name of Employer Occupation  
CIGNA BEHAVIORAL HEALTH, INC. Operations Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-2214-23-32

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Jodi Prohofsky

Mailing Address 360 W Point Rd

City State Zip Code  
Tonka Bay MN 55331

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

Name of Employer Occupation  
CIGNA BEHAVIORAL HEALTH, INC. Operations Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-2209-23-33

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Jodi Prohofsky

Mailing Address 360 W Point Rd

City State Zip Code  
Tonka Bay MN 55331

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

Name of Employer Occupation  
CIGNA BEHAVIORAL HEALTH, INC. Operations Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-2206-23-32

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 85  
(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
							17

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

**A.**

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

Mailing Address 622 Georgia Ave # 307

City State Zip Code  
Chattanooga TN 37402

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-14812-23-32

Amount of Each Receipt this Period  
19.25

**B.**

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

Mailing Address 1539 E Hackamore St

City State Zip Code  
Mesa AZ 85203

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-7888-23-32

Amount of Each Receipt this Period  
20.00

**C.**

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 CO Vice President Product Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-810-23-32

Amount of Each Receipt this Period  
25.00

**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 59 / 85
	<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 B. Richards	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 3 Scarborough Farms Rd	<b>Transaction ID:</b> 20080512-811-23-33
	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 Vice President Product Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas B. Richards	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 3 Scarborough Farms Rd	<b>Transaction ID:</b> 20080526-808-23-32
	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 Vice President Product Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Karen S. Rohan	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address PO Box 570	<b>Transaction ID:</b> 20080428-179-23-32
	City State Zip Code North Falmouth MA 02556	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation President Group, Dental & Vis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 85
	<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) Karen S. Rohan	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address PO Box 570	<b>Transaction ID:</b> 20080512-179-23-33
	City State Zip Code North Falmouth MA 02556	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation President Group, Dental & Vis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Karen S. Rohan	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address PO Box 570	<b>Transaction ID:</b> 20080526-178-23-32
	City State Zip Code North Falmouth MA 02556	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation President Group, Dental & Vis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael J. Ross	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 147 Old Gulph Rd	<b>Transaction ID:</b> 20080428-13027-23-32
	City State Zip Code Wynnewood PA 19096	Amount of Each Receipt this Period 96.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Vice President Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1056.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>196.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 85
	<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. Ross	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 147 Old Gulph Rd	<b>Transaction ID:</b> 20080512-12991-23-33
	City Wynnewood State PA Zip Code 19096	Amount of Each Receipt this Period 96.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Vice President Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1056.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael J. Ross	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 147 Old Gulph Rd	<b>Transaction ID:</b> 20080526-12953-23-32
	City Wynnewood State PA Zip Code 19096	Amount of Each Receipt this Period 96.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Vice President Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1056.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jonathan N. Rubin	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 108 W Mountain Rd	<b>Transaction ID:</b> 20080428-1435-23-32
	City West Simsbury State CT Zip Code 06092	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Svp Bfo Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 935.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>277.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 85
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jonathan N. Rubin		Date of Receipt MM / DD / YYYY 05 / 15 / 2008		
	Mailing Address 108 W Mountain Rd		<b>Transaction ID:</b> 20080512-1436-23-33		
	City West Simsbury	State CT	Zip Code 06092	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 Bfo	Aggregate Year-to-Date 935.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Jonathan N. Rubin		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 108 W Mountain Rd		<b>Transaction ID:</b> 20080526-1433-23-32		
	City West Simsbury	State CT	Zip Code 06092	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 Bfo	Aggregate Year-to-Date 935.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Jean C. Rush		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 73 Cidermill Hts		<b>Transaction ID:</b> 20080526-302-23-32		
	City North Granby	State CT	Zip Code 06060	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 General Manager	Aggregate Year-to-Date 211.75		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>189.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 85
	<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
	Mailing Address 5 Hawks Rdg		<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Avon	CT	06001
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080428-2397-23-32
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer	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="330.00"/>	<input type="text" value="30.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard B. Salmon		Date of Receipt
	Mailing Address 5 Hawks Rdg		<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Avon	CT	06001
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080512-2393-23-33
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer	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="330.00"/>	<input type="text" value="30.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard B. Salmon		Date of Receipt
	Mailing Address 5 Hawks Rdg		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Avon	CT	06001
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080526-2390-23-32
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer	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="330.00"/>	<input type="text" value="30.00"/>

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 85
	<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) David N. Sasportas	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 125 Wadhams Rd	<b>Transaction ID:</b> 20080526-504-23-32
	City State Zip Code Bloomfield CT 06002	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 App Development Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Sataline	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 18 Wyndham Ln	<b>Transaction ID:</b> 20080428-579-23-32
	City State Zip Code Farmington CT 06032	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Vice President Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 935.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank Sataline	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 18 Wyndham Ln	<b>Transaction ID:</b> 20080512-579-23-33
	City State Zip Code Farmington CT 06032	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Vice President Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 935.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	190.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 85
	<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) Frank Sataline	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 18 Wyndham Ln	<b>Transaction ID:</b> 20080526-576-23-32
	City State Zip Code Farmington CT 06032	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Vice President Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 935.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) David A. Savino	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 91 Trumbull Ln	<b>Transaction ID:</b> 20080428-759-23-32
	City State Zip Code South Windsor CT 06074	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Claims Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) David A. Savino	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 91 Trumbull Ln	<b>Transaction ID:</b> 20080512-759-23-33
	City State Zip Code South Windsor CT 06074	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Claims Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 85
	<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) David A. Savino	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 91 Trumbull Ln	<b>Transaction ID:</b> 20080526-756-23-32
	City State Zip Code South Windsor CT 06074	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Claims Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) David S. Scheibe	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 400 Kings Highway	<b>Transaction ID:</b> 20080526-1690-23-32
	City State Zip Code Moorestown NJ 08057	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Treasury Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mordecai Schwartz	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 717 Haviland Dr	<b>Transaction ID:</b> 20080428-7183-23-32
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Svp Treasury	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<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 67 / 85  
(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)  
Mordecai Schwartz

Mailing Address 717 Haviland Dr

City State Zip Code  
Bryn Mawr PA 19010

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

Name of Employer Occupation  
CIGNA CORPORATION Svp Treasury

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-7173-23-33

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Mordecai Schwartz

Mailing Address 717 Haviland Dr

City State Zip Code  
Bryn Mawr PA 19010

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

Name of Employer Occupation  
CIGNA CORPORATION Svp Treasury

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-7153-23-32

Amount of Each Receipt this Period  
30.00

**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 ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-20286-23-32

Amount of Each Receipt this Period  
19.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► **79.25**

**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 68 / 85  
(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 D. Slice

Mailing Address 19422 N 73rd Ave

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 Operations Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-4724-23-32

Amount of Each Receipt this Period  
19.25

**B.** 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 Occupation  
CIGNA HEALTHCARE OF AZ, INC Family Practice

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-7951-23-32

Amount of Each Receipt this Period  
20.00

**C.** 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 Occupation  
CHC Senior Segment Rvp Segment Lead

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-16096-23-32

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 59.25

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 85
	<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) Otha T. Spriggs		Date of Receipt MM / DD / YYYY 05 / 01 / 2008		
	Mailing Address 235 Ansley Close		<b>Transaction ID:</b> 20080428-11618-23-32		
	City Roswell	State GA	Zip Code 30075	Amount of Each Receipt this Period 85.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Vice President Human Resources			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 935.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Otha T. Spriggs		Date of Receipt MM / DD / YYYY 05 / 15 / 2008		
	Mailing Address 235 Ansley Close		<b>Transaction ID:</b> 20080512-11588-23-33		
	City Roswell	State GA	Zip Code 30075	Amount of Each Receipt this Period 85.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Vice President Human Resources			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 935.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Otha T. Spriggs		Date of Receipt MM / DD / YYYY 05 / 29 / 2008		
	Mailing Address 235 Ansley Close		<b>Transaction ID:</b> 20080526-11556-23-32		
	City Roswell	State GA	Zip Code 30075	Amount of Each Receipt this Period 85.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Vice President Human Resources			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 935.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	255.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 85
	<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) Jennifer Stepp		Date of Receipt
	Mailing Address 4144 Central Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 01 / 2008
	City	State	Zip Code
	Indianapolis	IN	46205
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> 20080428-5336-23-32
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Senior Account 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"/> 32.14
		<input type="text"/> 550.43	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jennifer Stepp		Date of Receipt
	Mailing Address 4144 Central Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 15 / 2008
	City	State	Zip Code
	Indianapolis	IN	46205
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> 20080512-5323-23-33
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Senior Account 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"/> 6.25
		<input type="text"/> 550.43	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jennifer Stepp		Date of Receipt
	Mailing Address 4144 Central Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 29 / 2008
	City	State	Zip Code
	Indianapolis	IN	46205
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> 20080526-5312-23-32
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Senior Account 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"/> 58.95
		<input type="text"/> 550.43	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 97.34
<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 71 / 85
	<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) Cathrin Stickney	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 69 W 9th St	<b>Transaction ID:</b> 20080526-10001-23-32
	City State Zip Code New York NY 10011	Amount of Each Receipt this Period 19.25
	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 ▼ 211.75	

<b>B.</b>	Full Name (Last, First, Middle Initial) Gregory J. Sullivan	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 27 Sunny Heights Rd	<b>Transaction ID:</b> 20080526-15171-23-32
	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 ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeff S. Terrill	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 9556 E Cortez St	<b>Transaction ID:</b> 20080526-10689-23-32
	City State Zip Code Scottsdale AZ 85260	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 Rvp Segment Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 85
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Nancy Tucker	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 522 E Commerce St	<b>Transaction ID:</b> 20080428-6014-23-32
	City State Zip Code Milford MI 48381	Amount of Each Receipt this Period 6.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: Senior Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.30	

<b>B.</b>	Full Name (Last, First, Middle Initial) Nancy Tucker	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 522 E Commerce St	<b>Transaction ID:</b> 20080512-6000-23-33
	City State Zip Code Milford MI 48381	Amount of Each Receipt this Period 6.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: Senior Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.30	

<b>C.</b>	Full Name (Last, First, Middle Initial) Nancy Tucker	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 522 E Commerce St	<b>Transaction ID:</b> 20080526-5988-23-32
	City State Zip Code Milford MI 48381	Amount of Each Receipt this Period 25.47
	FEC ID number of contributing federal political committee. C	
	Name of Employer: CT GENERAL LIFE INSURANCE CO Occupation: Senior Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.30	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>37.97</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 73 / 85  
(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 ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-878-23-32

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 Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 329.23

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-9928-23-32

Amount of Each Receipt this Period  
29.93

**C.** 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 Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 329.23

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

**Transaction ID:** 20080512-9903-23-33

Amount of Each Receipt this Period  
29.93

**SUBTOTAL** of Receipts This Page (optional) ..... ► **79.86**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 85  
(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)  
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 Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 329.23

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-9874-23-32

Amount of Each Receipt this Period  
29.93

**B.**

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 ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-12126-23-32

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Scott D. Watson

Mailing Address 1813 Shadywood Ct

City State Zip Code  
Chesterfield MO 63017

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 559.41

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

**Transaction ID:** 20080428-5799-23-32

Amount of Each Receipt this Period  
16.35

**SUBTOTAL** of Receipts This Page (optional) ..... ► **66.28**

**TOTAL** This Period (last page this line 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 75 / 85
	<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) Scott D. Watson	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 1813 Shadywood Ct	<b>Transaction ID:</b> 20080512-5786-23-33
	City State Zip Code Chesterfield MO 63017	Amount of Each Receipt this Period 25.48
	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 ▼ 559.41	

<b>B.</b>	Full Name (Last, First, Middle Initial) Scott D. Watson	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 1813 Shadywood Ct	<b>Transaction ID:</b> 20080526-5775-23-32
	City State Zip Code Chesterfield MO 63017	Amount of Each Receipt this Period 16.35
	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 ▼ 559.41	

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher J. Whelan	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 585 Country Club Rd	<b>Transaction ID:</b> 20080526-14874-23-32
	City State Zip Code Avon CT 06001	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 Analysis Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>61.83</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: PAGE 76 / 85  
(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)  
Richard M. White

Mailing Address 68 Longwood Dr

City State Zip Code  
Portland ME 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 ▼  
220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-2358-23-32

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Rebekah C. Whitehouse

Mailing Address 2640 W Tulsa St

City State Zip Code  
Chandler AZ 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 ▼  
220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-11481-23-32

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Lance Wilkes

Mailing Address 6 Langley Park

City State Zip Code  
Farmington CT 06032

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Financial Strategy Senior Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2008

**Transaction ID:** 20080526-11002-23-32

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 77 / 85
	<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) Allen R. Woolf		Date of Receipt
	Mailing Address 273 N Easton Rd		<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Glenside	PA	19038
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer	<b>Transaction ID:</b> 20080428-1410-23-32
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="275.00"/>	<input type="text" value="25.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Allen R. Woolf		Date of Receipt
	Mailing Address 273 N Easton Rd		<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Glenside	PA	19038
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer	<b>Transaction ID:</b> 20080512-1411-23-33
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="275.00"/>	<input type="text" value="25.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Allen R. Woolf		Date of Receipt
	Mailing Address 273 N Easton Rd		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Glenside	PA	19038
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer	<b>Transaction ID:</b> 20080526-1408-23-32
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="275.00"/>	<input type="text" value="25.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="75.00"/>
<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 78 / 85  
(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) Bu Yang		Date of Receipt MM / DD / YYYY 05 / 15 / 2008
Mailing Address 121 High Wood Dr		<b>Transaction ID:</b> 20080512-10680-23-33
City South Glastonbury	State Zip Code CT 06073	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.15
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Architecture Senior Director	Aggregate Year-to-Date ▼ 232.65
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Bu Yang		Date of Receipt MM / DD / YYYY 05 / 29 / 2008
Mailing Address 121 High Wood Dr		<b>Transaction ID:</b> 20080526-10648-23-32
City South Glastonbury	State Zip Code CT 06073	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.15
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Architecture Senior Director	Aggregate Year-to-Date ▼ 232.65
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	42.30
<b>TOTAL</b> This Period (last page this line number only) .....	9674.85

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

<b>A.</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: 7d830985d940e86c431 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 8
	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>B.</b> Full Name (Last, First, Middle Initial) Christopher Shays for Congress Committee <hr/> Mailing Address 98 East Avenue Rear Building <hr/> City Norwalk State CT Zip Code 06851 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Christopher Shays <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: f3f83b11e4ba491a7d1 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Demint for Senate Committee Inc <hr/> Mailing Address PO Box 12425 <hr/> City Columbia State SC Zip Code 29211 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Jim DeMint <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 38819925f5433e0c735 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of John Barrasso</p> <p>Mailing Address PO Box 52008</p> <p>City Casper State WY Zip Code 82605</p> <p>Purpose of Disbursement 2008 Primary</p> <p>Candidate Name John Barrasso</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> e7567427a200a0e73cd <b>Date of Disbursement</b> 05 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of John Tanner</p> <p>Mailing Address Post Office Box 1994</p> <p>City Union City State TN Zip Code 38281</p> <p>Purpose of Disbursement 2008 Primary</p> <p>Candidate Name John S. Tanner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> dfd696cf9aa7ae87fff <b>Date of Disbursement</b> 05 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jim Gerlach for Congress Committee</p> <p>Mailing Address PO Box 87</p> <p>City Uwchland State PA Zip Code 19480</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name James W. Gerlach</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7fe169c698fa14f89a0 <b>Date of Disbursement</b> 05 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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

4000.00

**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 81 / 85

<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)  
Sestak for Congress

Transaction ID: 6f09800169148b3d06e

Date of Disbursement

Mailing Address PO Box 16

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	0	8

City Media State PA Zip Code 19063

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
2008 General

011
-----

Category/  
Type

Candidate Name  
Joseph A. Sestak, Jr.

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: PA District: 07

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

2500.00
---------

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

10500.00
----------

# 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

A.	Full Name (Last, First, Middle Initial) Brian Moran for Delegate  Mailing Address 4154 Duke Street  City Alexandria State VA Zip Code 22304  Purpose of Disbursement Nonfederal Contribution Candidate Name Brian Moran for Delegate  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: cdff818ffe2bf2c09cf Date of Disbursement 05 / 09 / 2008  Amount of Each Disbursement this Period 350.00  011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Friends of Frank Wagner  Mailing Address PO Box 68008  City Virginia Beach State VA Zip Code 23471  Purpose of Disbursement Nonfederal Contribution Candidate Name Friends of Frank Wagner  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: 70ad26863d1b7d4ac19 Date of Disbursement 05 / 09 / 2008  Amount of Each Disbursement this Period 500.00  011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Friends of Kathy J. Byron  Mailing Address 523 Leesville Road  City Lynchburg State VA Zip Code 24502-0409  Purpose of Disbursement Nonfederal Contribution Candidate Name Friends of Kathy J. Byron  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: 547119ce7646119c3a6 Date of Disbursement 05 / 09 / 2008  Amount of Each Disbursement this Period 350.00  011 Category/ Type

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

1200.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Mark D. Sickles <hr/> Mailing Address PO Box 10628 <hr/> City Alexandria State VA Zip Code 22310 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name Friends of Mark D. Sickles <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: ea23853601d27473d30 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 350.00
	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) Friends of Richard Saslaw <hr/> Mailing Address PO Box 1856 <hr/> City Springfield State VA Zip Code 22151-0856 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name Friends of Richard Saslaw <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 426e5e7c1a98775ff9a Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	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) Friends of Sam Nixon <hr/> Mailing Address Post Office Box 34908 <hr/> City Richmond State VA Zip Code 23234 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name Friends of Sam Nixon <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2a7042e027822ee56c8 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 350.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1200.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends of Terry G. Kilgore	<b>Transaction ID:</b> 925ca2ca96a12b6b5a7	
	Mailing Address PO Box 669	Date of Disbursement MM / DD / YYYY 05 / 09 / 2008	
	City Gate City State VA Zip Code 24251	Amount of Each Disbursement this Period 350.00	
	Purpose of Disbursement Nonfederal Contribution Candidate Name Friends of Terry G. Kilgore Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	011 Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) Mark Herring for State Senate	<b>Transaction ID:</b> 8a71ae4a14901ec9f6e	
	Mailing Address Post Office Box 6246	Date of Disbursement MM / DD / YYYY 05 / 09 / 2008	
	City Leesburg State VA Zip Code 20178	Amount of Each Disbursement this Period 500.00	
	Purpose of Disbursement Nonfederal Contribution Candidate Name Mark Herring for State Senate Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	011 Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) Phil Puckett for State Senate	<b>Transaction ID:</b> e4f99d1d15db5976ea1	
	Mailing Address Post Office Box 924	Date of Disbursement MM / DD / YYYY 05 / 09 / 2008	
	City Tazewell State VA Zip Code 24651-0924	Amount of Each Disbursement this Period 500.00	
	Purpose of Disbursement Nonfederal Contribution Candidate Name Phil Puckett for State Senate Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	011 Category/ Type	

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

1350.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ward Armstrong for Delegate <hr/> Mailing Address Post Office Box 1431 <hr/> City Martinsville State VA Zip Code 24114 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name Ward Armstrong for Delegate <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: ead4032dc1f511ecfb8 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 350.00
	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) William Howell for Delegate <hr/> Mailing Address Post Office Box 8296 <hr/> City Fredericksburg State VA Zip Code 22404 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name William Howell for Delegate <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: 9ac3b8fbaafc5a00ba Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 350.00
	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) William Janis for Delegate <hr/> Mailing Address Post Office Box 3703 <hr/> City Glen Allen State VA Zip Code 23058 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name William Janis for Delegate <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: b815d390a11e0bb7679 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 350.00
	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) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	4800.00