

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Cigna Corporation Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="1432.53"/>	<input type="text" value="1432.53"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="27200.20"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="20190.26"/>	<input type="text" value="102757.93"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="47390.46"/>	<input type="text" value="104190.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="22500.00"/>	<input type="text" value="79300.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="24890.46"/>	<input type="text" value="24890.46"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Signa Corporation Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11232.20	37603.72
(ii) Unitemized	6458.06	61654.21
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	17690.26	99257.93
(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)	17690.26	99257.93
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.....	2500.00	3500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	20190.26	102757.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20190.26	102757.93

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	1600.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	1600.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	63500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	14200.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	22500.00	79300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22500.00	79300.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	17690.26	99257.93
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17690.26	99257.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	1600.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Supply Chain Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
06 / 07 / 2012

Transaction ID : 20120604-20453-21-53

Amount of Each Receipt this Period
25.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Supply Chain Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
06 / 21 / 2012

Transaction ID : 20120619-20372-11-45

Amount of Each Receipt this Period
25.00

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

Mailing Address 128 E 15th St

City Ship Bottom State NJ Zip Code 08008-4467

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

Name of Employer Cigna Corp. Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.09**

Date of Receipt
06 / 07 / 2012

Transaction ID : 20120604-12254-21-53

Amount of Each Receipt this Period
26.93

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

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

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

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

FOR LINE NUMBER: PAGE 7 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Michael B. Alexander
 Mailing Address 128 E 15th St
 City State Zip Code
 Ship Bottom NJ 08008-4467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cigna Corp. Medical Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-12213-11-45
 Amount of Each Receipt this Period
 26.93

Full Name (Last, First, Middle Initial)
B. Ann H. Asbaty
 Mailing Address 499 Washington Blvd
 City State Zip Code
 Jersey City NJ 07310-1995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO General Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-338-21-53
 Amount of Each Receipt this Period
 19.25

Full Name (Last, First, Middle Initial)
C. Ann H. Asbaty
 Mailing Address 499 Washington Blvd
 City State Zip Code
 Jersey City NJ 07310-1995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO General Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-338-11-45
 Amount of Each Receipt this Period
 19.25

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.43
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 76
	<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. William L. Atwell
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation President International

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 18 / 2012
Transaction ID : 25C49286E4421490A37

Amount of Each Receipt this Period
3080.00

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

Mailing Address 394 W Remington Dr

City Chandler State AZ Zip Code 85286-7642

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
606.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2012
Transaction ID : 20120604-5501-21-53

Amount of Each Receipt this Period
46.74

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

Mailing Address 394 W Remington Dr

City Chandler State AZ Zip Code 85286-7642

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
606.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 21 / 2012
Transaction ID : 20120619-5491-11-45

Amount of Each Receipt this Period
46.74

SUBTOTAL of Receipts This Page (optional)..... ▶ 3173.48

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Cigna Corporation Political Action Committee

A. Jeff Berardo
 Full Name (Last, First, Middle Initial)
 Mailing Address 499 Washington Blvd
 City Jersey City State NJ Zip Code 07310-1995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Director-Direct Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-2262-21-53
 Amount of Each Receipt this Period
 25.00

B. Jeff Berardo
 Full Name (Last, First, Middle Initial)
 Mailing Address 499 Washington Blvd
 City Jersey City State NJ Zip Code 07310-1995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Director-Direct Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-2256-11-45
 Amount of Each Receipt this Period
 25.00

C. Kim Bimestefer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3900 E Mexico Ave Ste 1100
 City Denver State CO Zip Code 80210-3946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-8711-21-53
 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 10 OF 76
(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. Kim Bimestefer
Full Name (Last, First, Middle Initial)

Mailing Address 3900 E Mexico Ave
Ste 1100

City Denver State CO Zip Code 80210-3946

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-8683-11-45

Amount of Each Receipt this Period **25.00**

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-1919-21-53

Amount of Each Receipt this Period **19.25**

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-1915-11-45

Amount of Each Receipt this Period **19.25**

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

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

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

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

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

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation EVP CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-9977-11-45

Amount of Each Receipt this Period
192.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation SVP Service Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-13955-21-53

Amount of Each Receipt this Period
96.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation SVP Service Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-13907-11-45

Amount of Each Receipt this Period
96.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 384.00

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

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

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

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

A. Zigmund R. Brzezinski
 Full Name (Last, First, Middle Initial)
 Mailing Address 499 Washington Blvd
 City Jersey City State NJ Zip Code 07310-1995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Operations Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-2764-11-45
 Amount of Each Receipt this Period
 17.11

B. M. Buckley
 Full Name (Last, First, Middle Initial)
 Mailing Address 525 W Monroe St
 City Chicago State IL Zip Code 60661-3629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Account Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-4623-11-45
 Amount of Each Receipt this Period
 9.67

C. Timothy D. Buckley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1601 Chestnut St # 2
 City Philadelphia State PA Zip Code 19192-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Internation Occupation VP Treasury
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-13694-21-53
 Amount of Each Receipt this Period
 29.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.78
TOTAL This Period (last page this line number only)..... ▶

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

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

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

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Internation Occupation VP Treasury

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **377.00**

Date of Receipt
06 / 21 / 2012

Transaction ID : 20120619-13646-11-45

Amount of Each Receipt this Period
29.00

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

Mailing Address 2223 Washington St

City Newton State MA Zip Code 02462-1417

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
06 / 07 / 2012

Transaction ID : 20120604-9596-21-53

Amount of Each Receipt this Period
25.00

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

Mailing Address 2223 Washington St

City Newton State MA Zip Code 02462-1417

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
06 / 21 / 2012

Transaction ID : 20120619-9565-11-45

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: (check only one)	PAGE 14 OF 76
	<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. William C. Carlson
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-737-21-53

Amount of Each Receipt this Period **25.00**

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-736-11-45

Amount of Each Receipt this Period **25.00**

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

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-1806-21-53

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 15 OF 76
(check only one)

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

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

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

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

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-1803-11-45

Amount of Each Receipt this Period
 200.00

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

Mailing Address 900 Cottage Grove Rd Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Coli

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-397-21-53

Amount of Each Receipt this Period
 90.00

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

Mailing Address 900 Cottage Grove Rd Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Coli

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-397-11-45

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 16 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Michael Conrad
Full Name (Last, First, Middle Initial)
Mailing Address 400 N Brand Blvd
City Glendale State CA Zip Code 91203-2311
FEC ID number of contributing federal political committee. **C**
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager-National Accts
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1091.15

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-2347-21-53
Amount of Each Receipt this Period 9.95

B. Michael Conrad
Full Name (Last, First, Middle Initial)
Mailing Address 400 N Brand Blvd
City Glendale State CA Zip Code 91203-2311
FEC ID number of contributing federal political committee. **C**
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager-National Accts
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1091.15

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-2341-11-45
Amount of Each Receipt this Period 9.67

C. David M. Cordani
Full Name (Last, First, Middle Initial)
Mailing Address 900 Cottage Grove Rd Bldg Wilde
City Hartford State CT Zip Code 06152-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation President and CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2089.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-480-21-53
Amount of Each Receipt this Period 192.00

SUBTOTAL of Receipts This Page (optional).....▶ 211.62
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 76
<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. Stephen W. Crawford
Full Name (Last, First, Middle Initial)

Mailing Address 216 B Ave

City Coronado State CA Zip Code 92118-1955

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

Name of Employer Cigna Corp. Occupation Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-13454-21-53

Amount of Each Receipt this Period **19.25**

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

Mailing Address 216 B Ave

City Coronado State CA Zip Code 92118-1955

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

Name of Employer Cigna Corp. Occupation Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-13407-11-45

Amount of Each Receipt this Period **19.25**

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

Mailing Address 2701 N Rocky Point Dr

City Tampa State FL Zip Code 33607-5917

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-8576-21-53

Amount of Each Receipt this Period **25.00**

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

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

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

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

FOR LINE NUMBER: PAGE 19 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 2701 N Rocky Point Dr

City Tampa State FL Zip Code 33607-5917

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 21 / 2012**
Transaction ID : 20120619-8550-11-45

Amount of Each Receipt this Period **25.00**

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

Mailing Address 2 College Park Dr

City Hooksett State NH Zip Code 03106-1636

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 07 / 2012**
Transaction ID : 20120604-10397-21-53

Amount of Each Receipt this Period **20.00**

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

Mailing Address 2 College Park Dr

City Hooksett State NH Zip Code 03106-1636

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 21 / 2012**
Transaction ID : 20120619-10359-11-45

Amount of Each Receipt this Period **20.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

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

Name of Employer Cigna Corp. Occupation Government Affairs Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-2554-21-53

Amount of Each Receipt this Period
 25.00

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

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

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

Name of Employer Cigna Corp. Occupation Government Affairs Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-2547-11-45

Amount of Each Receipt this Period
 25.00

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

Mailing Address 1601 Chestnut St # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Chief Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-241-21-53

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 21 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Johannes M. De Jong
 Full Name (Last, First, Middle Initial)
 Mailing Address 1601 Chestnut St # 2
 City Philadelphia State PA Zip Code 19192-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation VP Chief Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-241-11-45
 Amount of Each Receipt this Period 25.00

B. Edwin J. Detrick
 Full Name (Last, First, Middle Initial)
 Mailing Address 1601 Chestnut St # 2
 City Philadelphia State PA Zip Code 19192-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation VP Investor Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-2646-21-53
 Amount of Each Receipt this Period 20.00

C. Edwin J. Detrick
 Full Name (Last, First, Middle Initial)
 Mailing Address 1601 Chestnut St # 2
 City Philadelphia State PA Zip Code 19192-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation VP Investor Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-2639-11-45
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Jeannine Doherty
Full Name (Last, First, Middle Initial)
Mailing Address 25500 N Norterra Dr
City Phoenix State AZ Zip Code 85085-8200
FEC ID number of contributing federal political committee. **C**
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Account Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **419.47**

Date of Receipt **06 / 07 / 2012**
Transaction ID : 20120604-30-21-53
Amount of Each Receipt this Period **6.31**

B. Jeannine Doherty
Full Name (Last, First, Middle Initial)
Mailing Address 25500 N Norterra Dr
City Phoenix State AZ Zip Code 85085-8200
FEC ID number of contributing federal political committee. **C**
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Senior Account Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **419.47**

Date of Receipt **06 / 21 / 2012**
Transaction ID : 20120619-30-11-45
Amount of Each Receipt this Period **6.31**

C. Beverly J. Everett
Full Name (Last, First, Middle Initial)
Mailing Address 8228 Academy Rd
City Ellicott City State MD Zip Code 21043-5519
FEC ID number of contributing federal political committee. **C**
Name of Employer INT'L REHAB. ASSOCIATES, INC. Occupation Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 07 / 2012**
Transaction ID : 20120604-109-21-53
Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **32.62**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Beverly J. Everett
 Full Name (Last, First, Middle Initial)
 Mailing Address 8228 Academy Rd
 City Ellicott City State MD Zip Code 21043-5519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INT'L REHAB. ASSOCIATES, INC. Occupation Medical Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-109-11-45
 Amount of Each Receipt this Period
20.00

B. Kimberly A. Feltovic
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 Cottage Grove Rd Bldg Wilde
 City Hartford State CT Zip Code 06152-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Account Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-12361-21-53
 Amount of Each Receipt this Period
19.25

C. Kimberly A. Feltovic
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 Cottage Grove Rd Bldg Wilde
 City Hartford State CT Zip Code 06152-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation Account Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-12319-11-45
 Amount of Each Receipt this Period
19.25

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-1981-21-53

Amount of Each Receipt this Period 20.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-1977-11-45

Amount of Each Receipt this Period 20.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-251-21-53

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 25 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-251-11-45

Amount of Each Receipt this Period 200.00

B. Richard H. Forde
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-932-21-53

Amount of Each Receipt this Period 90.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-931-11-45

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: PAGE 26 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-2976-21-53

Amount of Each Receipt this Period
25.00

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

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-2968-11-45

Amount of Each Receipt this Period
25.00

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

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-2118-21-53

Amount of Each Receipt this Period
19.25

SUBTOTAL of Receipts This Page (optional)..... ▶ **69.25**

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 27 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 499 Washington Blvd

City Jersey City State NJ Zip Code 07310-1995

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-2113-11-45

Amount of Each Receipt this Period 19.25

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

Mailing Address 612 Wheelers Farms Rd

City Milford State CT Zip Code 06461-1673

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 388.78

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-4158-21-53

Amount of Each Receipt this Period 11.34

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

Mailing Address 612 Wheelers Farms Rd

City Milford State CT Zip Code 06461-1673

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 388.78

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-4149-11-45

Amount of Each Receipt this Period 6.79

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.38

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation Assoc Chief Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-3092-21-53

Amount of Each Receipt this Period
40.00

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation Assoc Chief Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-3085-11-45

Amount of Each Receipt this Period
40.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Strat And Bus Develop Sr Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-2037-21-53

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

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 29 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Richard Gray		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-2032-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 25.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 325.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Strat And Bus Develop Sr Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. David D. Guilmette		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-20170-21-53
Mailing Address 140 E 45th St		Amount of Each Receipt this Period 50.00
City New York	State NY	
Zip Code 10017-3144		Aggregate Year-to-Date ▼ 792.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Pres National Pharm & Product	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. David D. Guilmette		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-20089-11-45
Mailing Address 140 E 45th St		Amount of Each Receipt this Period 192.00
City New York	State NY	
Zip Code 10017-3144		Aggregate Year-to-Date ▼ 792.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation Pres National Pharm & Product	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	267.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Douglas R. Hadley		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-6502-21-53
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 25.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 325.00
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Medical Officer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Douglas R. Hadley		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-6489-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 25.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 325.00
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Medical Officer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Joseph L. Hannah		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-5342-21-53
Mailing Address 901 E Cary St		Amount of Each Receipt this Period 20.00
City Richmond	State VA	
Zip Code 23219-4063		Aggregate Year-to-Date ▼ 260.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Sales Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 901 E Cary St

City Richmond State VA Zip Code 23219-4063

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-5332-11-45

Amount of Each Receipt this Period 20.00

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

Mailing Address 1 Cigna Dr

City Bourbonnais State IL Zip Code 60914-4475

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

Name of Employer Cigna Corp. Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-13045-21-53

Amount of Each Receipt this Period 19.25

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

Mailing Address 1 Cigna Dr

City Bourbonnais State IL Zip Code 60914-4475

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

Name of Employer Cigna Corp. Occupation Operations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-13001-11-45

Amount of Each Receipt this Period 19.25

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 76
	<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. George W. Hoagland
Full Name (Last, First, Middle Initial)

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

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

Name of Employer Cigna Corp. Occupation VP Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-13918-21-53

Amount of Each Receipt this Period
 120.00

B. George W. Hoagland
Full Name (Last, First, Middle Initial)

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

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

Name of Employer Cigna Corp. Occupation VP Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-13870-11-45

Amount of Each Receipt this Period
 120.00

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

Mailing Address 2 College Park Dr

City Hooksett State NH Zip Code 03106-1636

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-801-21-53

Amount of Each Receipt this Period
 19.24

SUBTOTAL of Receipts This Page (optional)..... ▶ 259.24

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2 College Park Dr

City Hooksett State NH Zip Code 03106-1636

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.12

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-800-11-45

Amount of Each Receipt this Period 19.24

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

Mailing Address 3430 List Pl

City Minneapolis State MN Zip Code 55416-4559

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

Name of Employer Cigna Corp. Occupation Business Project Sr Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-17663-21-53

Amount of Each Receipt this Period 20.00

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

Mailing Address 3430 List Pl

City Minneapolis State MN Zip Code 55416-4559

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

Name of Employer Cigna Corp. Occupation Business Project Sr Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-17599-11-45

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 59.24

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 34 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-1833-21-53

Amount of Each Receipt this Period
 19.25

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-1830-11-45

Amount of Each Receipt this Period
 19.25

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-128-21-53

Amount of Each Receipt this Period
 26.93

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Nicole S. Jones		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-13507-21-53
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 192.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 2496.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation EVP Genl Counsel & Pub Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Nicole S. Jones		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-13460-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 192.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 2496.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation EVP Genl Counsel & Pub Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Scott Josephs		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-7215-21-53
Mailing Address 701 Corporate Center Dr		Amount of Each Receipt this Period 25.00
City Raleigh	State NC	
Zip Code 27607-5084		Aggregate Year-to-Date ▼ 325.00
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	409.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 37 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 701 Corporate Center Dr

City Raleigh State NC Zip Code 27607-5084

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Medical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 21 / 2012**
Transaction ID : 20120619-7201-11-45

Amount of Each Receipt this Period **25.00**

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

Mailing Address 1 Front St

City San Francisco State CA Zip Code 94111-5325

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **06 / 07 / 2012**
Transaction ID : 20120604-6802-21-53

Amount of Each Receipt this Period **50.00**

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

Mailing Address 1 Front St

City San Francisco State CA Zip Code 94111-5325

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **06 / 21 / 2012**
Transaction ID : 20120619-6788-11-45

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **125.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 76
	<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. Matthew G. Manders
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Pres Regional & Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1546.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-2187-21-53

Amount of Each Receipt this Period 192.00

B. Matthew G. Manders
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Pres Regional & Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1546.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-2182-11-45

Amount of Each Receipt this Period 192.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-272-21-53

Amount of Each Receipt this Period 19.00

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

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

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

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

FOR LINE NUMBER: PAGE 40 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2223 Washington St

City State Zip Code
 Newton MA 02462-1417

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : 20120604-10273-21-53

Amount of Each Receipt this Period
25.00

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

Mailing Address 2223 Washington St

City State Zip Code
 Newton MA 02462-1417

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : 20120619-10236-11-45

Amount of Each Receipt this Period
25.00

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

Mailing Address 1601 Chestnut St
 # 2

City State Zip Code
 Philadelphia PA 19192-0002

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

Name of Employer Occupation
 Cigna Corp. VP Finance

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : 20120604-9831-21-53

Amount of Each Receipt this Period
50.00

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

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

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

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

FOR LINE NUMBER: PAGE 41 OF 76
(check only one)

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

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

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

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-9799-11-45

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Kymberly P. Miranda

Mailing Address 520 SE 5th Ave

City Fort Lauderdale State FL Zip Code 33301-2932

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-4763-21-53

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Kymberly P. Miranda

Mailing Address 520 SE 5th Ave

City Fort Lauderdale State FL Zip Code 33301-2932

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-4753-11-45

Amount of Each Receipt this Period
20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1601 Chestnut St # 2
City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation EVP Human Resources & Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-10908-21-53

Amount of Each Receipt this Period 100.00

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

Mailing Address 1601 Chestnut St # 2
City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation EVP Human Resources & Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-10870-11-45

Amount of Each Receipt this Period 100.00

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

Mailing Address 900 Cottage Grove Rd Bldg Wilde
City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-4727-21-53

Amount of Each Receipt this Period 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Paula Murphy		Date of Receipt 06 / 21 / 2012 Transaction ID : 20120619-4717-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 20.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 260.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation IT Senior Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Noreen Nageotte		Date of Receipt 06 / 07 / 2012 Transaction ID : 20120604-7459-21-53
Mailing Address 3 Summit Park Dr		Amount of Each Receipt this Period 20.00
City Independence	State OH	
Zip Code 44131-2599		Aggregate Year-to-Date ▼ 260.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Noreen Nageotte		Date of Receipt 06 / 21 / 2012 Transaction ID : 20120619-7441-11-45
Mailing Address 3 Summit Park Dr		Amount of Each Receipt this Period 20.00
City Independence	State OH	
Zip Code 44131-2599		Aggregate Year-to-Date ▼ 260.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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 44 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Ralph J. Nicoletti		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-23586-21-53
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 192.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 576.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation EVP CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ralph J. Nicoletti		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-23492-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 192.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 576.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation EVP CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Daniel Nicoll		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-2079-21-53
Mailing Address 499 Washington Blvd		Amount of Each Receipt this Period 26.93
City Jersey City	State NJ	
Zip Code 07310-1995		Aggregate Year-to-Date ▼ 350.09
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Medical Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	410.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Daniel Nicoll		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-2074-11-45
Mailing Address 499 Washington Blvd		Amount of Each Receipt this Period 26.93
City Jersey City	State NJ	Zip Code 07310-1995
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Medical Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.09	

Full Name (Last, First, Middle Initial) B. Eliana Nunez		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-1251-21-53
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 17.37
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operating Effectiveness Sr Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.47	

Full Name (Last, First, Middle Initial) C. Eliana Nunez		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-1250-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 17.37
City Hartford	State CT	Zip Code 06152-0001
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Operating Effectiveness Sr Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.47	

SUBTOTAL of Receipts This Page (optional).....▶	61.67
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 46 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 11712 Emerald Falls Dr

City State Zip Code
 Austin TX 78738-5329

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

Name of Employer Occupation
 Cigna Corp. Government Affairs Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 599.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-13425-21-53

Amount of Each Receipt this Period
 46.15

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

Mailing Address 11712 Emerald Falls Dr

City State Zip Code
 Austin TX 78738-5329

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

Name of Employer Occupation
 Cigna Corp. Government Affairs Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 599.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-13378-11-45

Amount of Each Receipt this Period
 46.15

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

Mailing Address 900 Cottage Grove Rd
 Bldg Wilde

City State Zip Code
 Hartford CT 06152-0001

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

Name of Employer Occupation
 Cigna Corp. Business Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-6060-21-53

Amount of Each Receipt this Period
 25.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Eric P. Palmer		Date of Receipt
Mailing Address 900 Cottage Grove Rd Bldg Wilde		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City	State	Zip Code
Hartford	CT	06152-0001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20120619-6049-11-45
Name of Employer	Occupation	Amount of Each Receipt this Period
Cigna Corp.	Business Financial Officer	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	

Full Name (Last, First, Middle Initial) B. Jeffery P. Panter		Date of Receipt
Mailing Address 7555 Goodwin Rd		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code
Chattanooga	TN	37421-3183
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20120604-5019-21-53
Name of Employer	Occupation	Amount of Each Receipt this Period
CT GENERAL LIFE INSURANCE CO	Claims Senior Director	<input type="text" value="19.25"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.25"/>	

Full Name (Last, First, Middle Initial) C. Jeffery P. Panter		Date of Receipt
Mailing Address 7555 Goodwin Rd		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City	State	Zip Code
Chattanooga	TN	37421-3183
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20120619-5009-11-45
Name of Employer	Occupation	Amount of Each Receipt this Period
CT GENERAL LIFE INSURANCE CO	Claims Senior Director	<input type="text" value="19.25"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.25"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="63.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Talent Optimization

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1170.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-11288-21-53

Amount of Each Receipt this Period
90.00

Full Name (Last, First, Middle Initial)
B. Charlene Parsons

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Talent Optimization

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1170.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-11249-11-45

Amount of Each Receipt this Period
90.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation SVP Reinsurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-467-21-53

Amount of Each Receipt this Period
40.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mark A. Parsons		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-467-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 40.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 520.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation SVP Reinsurance	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Carole A. Pirozzi		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-2523-21-53
Mailing Address 4651 Maryann Ln		Amount of Each Receipt this Period 19.25
City Bethlehem	State PA	
Zip Code 18017-8431		Aggregate Year-to-Date ▼ 231.00
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation HR Senior Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) c. Charles C. Pitts		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-13656-21-53
Mailing Address 11016 Rushmore Dr		Amount of Each Receipt this Period 19.23
City Charlotte	State NC	
Zip Code 28277-3474		Aggregate Year-to-Date ▼ 249.99
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation General Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	78.48
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Charles C. Pitts
 Full Name (Last, First, Middle Initial)
 Mailing Address 11016 Rushmore Dr
 City Charlotte State NC Zip Code 28277-3474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation General Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.99

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-13608-11-45
 Amount of Each Receipt this Period
 19.23

B. David M. Porcello
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 Cottage Grove Rd Bldg Wilde
 City Hartford State CT Zip Code 06152-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation VP Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-1352-21-53
 Amount of Each Receipt this Period
 30.00

C. David M. Porcello
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 Cottage Grove Rd Bldg Wilde
 City Hartford State CT Zip Code 06152-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Corp. Occupation VP Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-1351-11-45
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 79.23
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address Bradley Airport Hangar 85-176

City Windsor Locks State CT Zip Code 06096

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Aviation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-339-21-53

Amount of Each Receipt this Period **20.00**

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

Mailing Address Bradley Airport Hangar 85-176

City Windsor Locks State CT Zip Code 06096

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Aviation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-339-11-45

Amount of Each Receipt this Period **20.00**

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

Mailing Address 401 Chestnut St

City Chattanooga State TN Zip Code 37402-4924

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-11240-21-53

Amount of Each Receipt this Period **19.25**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Michael J. Raybeck		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-11201-11-45
Mailing Address 401 Chestnut St		Amount of Each Receipt this Period 19.25
City Chattanooga	State TN	Zip Code 37402-4924
FEC ID number of contributing federal political committee. C		
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.25	

Full Name (Last, First, Middle Initial) B. William J. Reedy		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-5989-21-53
Mailing Address Stapley Corporate Center		Amount of Each Receipt this Period 20.00
City Mesa	State AZ	Zip Code 85204
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna HEALTHCARE OF AZ, INC	Occupation Urgent Care Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. William J. Reedy		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-5978-11-45
Mailing Address Stapley Corporate Center		Amount of Each Receipt this Period 20.00
City Mesa	State AZ	Zip Code 85204
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna HEALTHCARE OF AZ, INC	Occupation Urgent Care Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

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: PAGE 53 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 900 Cottage Grove Rd
 Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Segment Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 07 / 2012
Transaction ID : 20120604-666-53

Amount of Each Receipt this Period
 25.00

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

Mailing Address 900 Cottage Grove Rd
 Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Segment Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 21 / 2012
Transaction ID : 20120619-665-11-45

Amount of Each Receipt this Period
 25.00

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

Mailing Address 1601 Chestnut St
 # 2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP BFO International

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1300.00

Date of Receipt
 06 / 07 / 2012
Transaction ID : 20120604-22999-21-53

Amount of Each Receipt this Period
 100.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP BFO International

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-22906-11-45

Amount of Each Receipt this Period
100.00

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

Mailing Address 4000 Faber Place Dr

City Charleston State SC Zip Code 29405-8585

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-2150-21-53

Amount of Each Receipt this Period
25.00

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

Mailing Address 4000 Faber Place Dr

City Charleston State SC Zip Code 29405-8585

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-2145-11-45

Amount of Each Receipt this Period
25.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 76
	<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. Michael J. Ross
Full Name (Last, First, Middle Initial)

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-9851-21-53

Amount of Each Receipt this Period
96.00

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-9819-11-45

Amount of Each Receipt this Period
96.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Occupation
CT GENERAL LIFE INSURANCE CO Medical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-1985-21-53

Amount of Each Receipt this Period
30.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 76
	<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. Richard B. Salmon
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Medical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-1981-11-45

Amount of Each Receipt this Period
30.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-408-21-53

Amount of Each Receipt this Period
20.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-408-11-45

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 57 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 900 Cottage Grove Rd
 Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1105.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : 20120604-468-11-53

Amount of Each Receipt this Period
85.00

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

Mailing Address 900 Cottage Grove Rd
 Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1105.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : 20120619-468-11-45

Amount of Each Receipt this Period
85.00

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

Mailing Address 900 Cottage Grove Rd
 Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Strategic Sourcing Sr Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : 20120604-630-21-53

Amount of Each Receipt this Period
25.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 76
<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. David A. Savino
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Strategic Sourcing Sr Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-629-11-45

Amount of Each Receipt this Period **25.00**

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-1433-21-53

Amount of Each Receipt this Period **20.00**

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

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-1431-11-45

Amount of Each Receipt this Period **20.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 76
	<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. Richard J. Shube
Full Name (Last, First, Middle Initial)

Mailing Address 3900 E Mexico Ave
Ste 1100

City State Zip Code
Denver CO 80210-3946

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.25

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-14395-21-53

Amount of Each Receipt this Period
19.25

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

Mailing Address 3900 E Mexico Ave
Ste 1100

City State Zip Code
Denver CO 80210-3946

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.25

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-14344-11-45

Amount of Each Receipt this Period
19.25

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

Mailing Address 25600 N Norterra Dr

City State Zip Code
Phoenix AZ 85085-8201

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

Name of Employer Occupation
Cigna HEALTHCARE OF AZ, INC Operations Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.25

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-3782-21-53

Amount of Each Receipt this Period
19.25

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 25600 N Norterra Dr

City Phoenix State AZ Zip Code 85085-8201

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

Name of Employer Cigna HEALTHCARE OF AZ, INC Occupation Operations Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-3774-11-45

Amount of Each Receipt this Period 19.25

B. Raymond Smithberger
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-10832-21-53

Amount of Each Receipt this Period 19.25

C. Raymond Smithberger
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-10794-11-45

Amount of Each Receipt this Period 19.25

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 7555 Goodwin Rd

City Chattanooga State TN Zip Code 37421-3183

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation HR Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-10935-21-53

Amount of Each Receipt this Period **19.25**

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

Mailing Address 7555 Goodwin Rd

City Chattanooga State TN Zip Code 37421-3183

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

Name of Employer CT GENERAL LIFE INSURANCE CO Occupation HR Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-10897-11-45

Amount of Each Receipt this Period **19.25**

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

Mailing Address One Penn Mark Plaza

City Carmel State IN Zip Code 46032

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **582.16**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-4222-21-53

Amount of Each Receipt this Period **55.57**

SUBTOTAL of Receipts This Page (optional)..... **94.07**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address One Penn Mark Plaza

City Carmel State IN Zip Code 46032

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **582.16**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-4213-11-45

Amount of Each Receipt this Period **6.31**

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

Mailing Address 1050 Hyatt Rd

City Southold State NY Zip Code 11971-3118

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-7579-21-53

Amount of Each Receipt this Period **19.25**

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

Mailing Address 1050 Hyatt Rd

City Southold State NY Zip Code 11971-3118

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-7561-11-45

Amount of Each Receipt this Period **19.25**

SUBTOTAL of Receipts This Page (optional)..... **44.81**

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

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

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

FOR LINE NUMBER: PAGE 63 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 11095 Viking Dr

City State Zip Code
 Eden Prairie MN 55344-7223

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

Name of Employer Occupation
 Cigna Corp. Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-18779-21-53

Amount of Each Receipt this Period
 20.00

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

Mailing Address 11095 Viking Dr

City State Zip Code
 Eden Prairie MN 55344-7223

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

Name of Employer Occupation
 Cigna Corp. Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2012
Transaction ID : 20120619-18708-11-45

Amount of Each Receipt this Period
 20.00

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

Mailing Address 900 Cottage Grove Rd
 Bldg Wilde

City State Zip Code
 Hartford CT 06152-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : 20120604-11456-21-53

Amount of Each Receipt this Period
 26.93

SUBTOTAL of Receipts This Page (optional)..... ▶ 66.93

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Gregory J. Sullivan		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-11416-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 26.93
City Hartford	State Zip Code CT 06152-0001	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 350.09
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) ▼		

Full Name (Last, First, Middle Initial) B. Shelly Swinford		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-4204-21-53
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 18.47
City Hartford	State Zip Code CT 06152-0001	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 237.69
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) ▼		

Full Name (Last, First, Middle Initial) c. Shelly Swinford		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-4195-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 18.47
City Hartford	State Zip Code CT 06152-0001	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 237.69
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	63.87
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 76
	<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. Jeff S. Terrill
Full Name (Last, First, Middle Initial)

Mailing Address 25500 N Norterra Dr

City Phoenix State AZ Zip Code 85085-8200

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-8126-21-53

Amount of Each Receipt this Period 20.00

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

Mailing Address 25500 N Norterra Dr

City Phoenix State AZ Zip Code 85085-8200

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-8107-11-45

Amount of Each Receipt this Period 20.00

C. Jeffrey E. Tindall
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Government Affairs Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-11657-21-53

Amount of Each Receipt this Period 20.00

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

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

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

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

FOR LINE NUMBER: PAGE 66 OF 76
(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. Jeffrey E. Tindall
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation Government Affairs Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-11618-11-45

Amount of Each Receipt this Period 200.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-8402-21-53

Amount of Each Receipt this Period 30.00

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

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-8380-11-45

Amount of Each Receipt this Period 30.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Katharine L. Wade		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-726-21-53
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 125.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 1310.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation VP Public Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Katharine L. Wade		Date of Receipt MM / DD / YYYY 06 / 21 / 2012 Transaction ID : 20120619-725-11-45
Mailing Address 900 Cottage Grove Rd Bldg Wilde		Amount of Each Receipt this Period 125.00
City Hartford	State CT	
Zip Code 06152-0001		Aggregate Year-to-Date ▼ 1310.00
FEC ID number of contributing federal political committee. C		
Name of Employer Cigna Corp.	Occupation VP Public Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Brian Wallach		Date of Receipt MM / DD / YYYY 06 / 07 / 2012 Transaction ID : 20120604-7482-21-53
Mailing Address 2700 Post Oak Blvd		Amount of Each Receipt this Period 29.93
City Houston	State TX	
Zip Code 77056-5784		Aggregate Year-to-Date ▼ 389.09
FEC ID number of contributing federal political committee. C		
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Sr Dir	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	279.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

Mailing Address 2700 Post Oak Blvd

City Houston State TX Zip Code 77056-5784

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **389.09**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-7464-11-45

Amount of Each Receipt this Period **29.93**

B. Patricia J. Walsh
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Deputy General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt **06 / 07 / 2012**

Transaction ID : 20120604-23058-21-53

Amount of Each Receipt this Period **100.00**

C. Patricia J. Walsh
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

Name of Employer Cigna Corp. Occupation VP Deputy General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt **06 / 21 / 2012**

Transaction ID : 20120619-22965-11-45

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **229.93**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Scott D. Watson
Full Name (Last, First, Middle Initial)
Mailing Address 231 S Bemiston Ave
City Clayton State MO Zip Code 63105-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Senior Account Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **527.73**

Date of Receipt **06 / 07 / 2012**
Transaction ID : 20120604-4596-21-53
Amount of Each Receipt this Period **16.46**

B. Scott D. Watson
Full Name (Last, First, Middle Initial)
Mailing Address 231 S Bemiston Ave
City Clayton State MO Zip Code 63105-1914
FEC ID number of contributing federal political committee. **C**
Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Senior Account Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **527.73**

Date of Receipt **06 / 21 / 2012**
Transaction ID : 20120619-4586-11-45
Amount of Each Receipt this Period **16.46**

C. Christopher J. Whelan
Full Name (Last, First, Middle Initial)
Mailing Address 900 Cottage Grove Rd Bldg Wilde
City Hartford State CT Zip Code 06152-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Financial Analysis Sr Dir
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 07 / 2012**
Transaction ID : 20120604-11277-21-53
Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **52.92**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Martin J. Wong

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-23142-21-53

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Martin J. Wong

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

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

Name of Employer Cigna Corp. Occupation VP Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
06 / 21 / 2012
Transaction ID : 20120619-23049-11-45

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Bu Yang

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.95

Date of Receipt
06 / 07 / 2012
Transaction ID : 20120604-8092-21-53

Amount of Each Receipt this Period
21.15

SUBTOTAL of Receipts This Page (optional)..... ▶ 121.15

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 76
	<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. Bu Yang
Full Name (Last, First, Middle Initial)

Mailing Address 900 Cottage Grove Rd
Bldg Wilde

City Hartford State CT Zip Code 06152-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 274.95

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-8073-11-45

Amount of Each Receipt this Period 21.15

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

Mailing Address 11095 Viking Dr

City Eden Prairie State MN Zip Code 55344-7223

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

Name of Employer Cigna Corp. Occupation Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 07 / 2012
Transaction ID : 20120604-12864-21-53

Amount of Each Receipt this Period 20.00

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

Mailing Address 11095 Viking Dr

City Eden Prairie State MN Zip Code 55344-7223

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

Name of Employer Cigna Corp. Occupation Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 21 / 2012
Transaction ID : 20120619-12821-11-45

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional).....▶	61.15
TOTAL This Period (last page this line number only).....▶	11232.20

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

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

FOR LINE NUMBER: PAGE 73 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial)
A. Blue Hen PAC

Mailing Address PO Box 15293

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00493700

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 06 / 01 / 2012
Transaction ID : 141E95F3B2188F93B47

Amount of Each Receipt this Period
 500.00

Refund

Full Name (Last, First, Middle Initial)
B. Friends of Dick Lugar Inc

Mailing Address PO Box 55952

City Indianapolis State IN Zip Code 46205

FEC ID number of contributing federal political committee. **C** C00122176

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 06 / 04 / 2012
Transaction ID : 79821FD099E7064438A

Amount of Each Receipt this Period
 2000.00

Refund

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

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

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

Full Name (Last, First, Middle Initial)

A. Bob Casey for Senate Inc

Mailing Address 30 South 15th Street Suite 400

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
2012 General

011

Candidate Name

Robert P. Casey Jr

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2012

Transaction ID : 7E3D54BBE63EA1B5A16

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Cantor for Congress

Mailing Address PO Box 17813

City Richmond State VA Zip Code 23226

Purpose of Disbursement
2012 General

011

Candidate Name

Eric Ivan Cantor

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District: 07

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2012

Transaction ID : E9B36D6A1B7AA3A94DC

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Charles Boustany Jr. MD for Congress, Inc.

Mailing Address PO Box 80126

City Lafayette State LA Zip Code 70598

Purpose of Disbursement
2012 Primary

011

Candidate Name

Charles W. Boustany Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: LA District: 07

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2012

Transaction ID : 7F4C6F51EC4E0C67CE6

Amount of Each Disbursement this Period

2500.00

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

A. Friends of John Barrasso

Mailing Address PO Box 52008

City Casper State WY Zip Code 82605

Purpose of Disbursement
2012 Primary

011

Candidate Name

John Anthony Barrasso

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WY District:

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2012

Transaction ID : 28A7170AD0A69CF187B

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of John Barrasso

Mailing Address PO Box 52008

City Casper State WY Zip Code 82605

Purpose of Disbursement
2012 General

011

Candidate Name

John Anthony Barrasso

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WY District:

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2012

Transaction ID : 295DF2CEDF3FCB1EEA4

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

C. Heller for Senate

Mailing Address PO Box 371907

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement
2012 General

011

Candidate Name

Dean Heller

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2012

Transaction ID : 1CC20BD43F26C9F237C

Amount of Each Disbursement this Period

5000.00

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Matheson for Congress

Mailing Address PO Box 521048

City State Zip Code
Salt Lake City UT 84152

Purpose of Disbursement
2012 General

011

Candidate Name

James David Matheson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: UT District: 04

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2012

Transaction ID : 576F6FC8A02D22A6BBE

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2500.00

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

22500.00