06/23/2005 17 : 01

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

CIGNA Corporation Political Action Committee

ADDRESS (Number and Street)

Two Liberty Place

X (Check if address is changed)

1601 Chestnut St

Philadelphia | PA | 19192 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

cignapac@cigna.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2157615351

2. DATE M M D D Y Y Y Y 06 21 2005

3. **FEC IDENTIFICATION NUMBER** **C** C00085316

4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)

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

Type or Print Name of Treasurer Mordecai Schwartz

Signature of Treasurer Electronically Filed by Mordecai Schwartz Date M M D D Y Y Y Y 06 23 2005

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

(a) This committee is a principal campaign committee. (Complete the candidate information below.)

(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought: House Senate President

State District

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican,etc.) Party.

(e) X This committee is a separate segregated fund

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

CIGNA Corporation

Mailing Address Two Liberty Place

1601 Chestnut St

Philadelphia PA 19192 -

CITY STATE ZIP CODE

Relationship Connected

Type of Connected Organization:

X Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

CIGNA Corporation Political Action Committee

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name: Mari Newman

Mailing Address: Two Liberty Place
1601 Chestnut St
Philadelphia PA 19192 –

Title or Position ▼: Senior Associate

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 215 – 761 – 6035

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: Mordecai Schwartz

Mailing Address: Two Liberty Place
1601 Chestnut St
Philadelphia PA 19192 –

Title or Position ▼: VP & Treasurer

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 215 – 761 – 6222

Full Name of Designated Agent: Kristin Julason

Mailing Address: 601 Pennsylvania Ave NW
Suite 500 South Building
Washington DC 20004 –

Title or Position ▼: VP, Federal Affairs

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 202 – 861 – 1451

9. **Banks** or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

PNC Bank

Mailing Address 900 Cottage Grove Rd

Hartford CT 06152 -

CITY STATE ZIP CODE