

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 06 01 2008 through 06 30 2008

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

Type or Print Name of Treasurer Mordecai Schwartz

Signature of Treasurer Electronically Filed by Mordecai Schwartz Date 07 07 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
CIGNA Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		12499.05
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	28903.14									
(c) Total Receipts (from Line 19) .....	16521.67	111075.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	45424.81	123574.81								
7. Total Disbursements (from Line 31) .....	7302.00	85452.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	38122.81	38122.81								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
CIGNA Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7764.31	34918.23
(i) Itemized (use Schedule A) .....	8757.36	73861.53
(ii) Unitemized .....	16521.67	108779.76
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	16521.67	108779.76
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	2296.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	16521.67	111075.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	16521.67	111075.76

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	7750.00	55250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	2.00	602.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	2.00	602.00
29. Other Disbursements.....	-450.00	29600.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7302.00	85452.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7302.00	85452.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	16521.67	108779.76
34. Total Contribution Refunds (from Line 28(d)) .....	2.00	602.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16519.67	108177.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 252 North Main Street

City State Zip Code  
Doylestown PA 18901

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

Name of Employer Occupation  
CBH Provider Oversight Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.09

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-16404-16-49

Amount of Each Receipt this Period  
26.93

**B.**

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

Mailing Address 252 North Main Street

City State Zip Code  
Doylestown PA 18901

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

Name of Employer Occupation  
CBH Provider Oversight Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.09

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-16357-11-26

Amount of Each Receipt this Period  
26.93

**C.**

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

Mailing Address 3 Huntington Dr

City State Zip Code  
Randolph NJ 07869

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-402-16-49

Amount of Each Receipt this Period  
19.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► **73.11**

**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 7 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ann H. Asbaty		Date of Receipt
	Mailing Address 3 Huntington Dr		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Randolph	NJ	07869
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 20080624-401-11-26
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation General Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.25"/>	<input type="text" value="19.25"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) James Austin		Date of Receipt
	Mailing Address 394 W Remington Dr		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chandler	AZ	85248
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 20080610-7237-16-49
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation General Surgeon	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="666.05"/>	<input type="text" value="50.86"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) James Austin		Date of Receipt
	Mailing Address 394 W Remington Dr		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chandler	AZ	85248
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 20080624-7215-11-26
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation General Surgeon	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="666.05"/>	<input type="text" value="50.86"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="120.97"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) W. Barksdale	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 2632 Lovejoy Cir	<b>Transaction ID:</b> 20080610-16506-16-49
	City State Zip Code Duluth GA 30097	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CHC Contracting and Network De	Occupation Provider Contracting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1105.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) W. Barksdale	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 2632 Lovejoy Cir	<b>Transaction ID:</b> 20080624-16458-11-26
	City State Zip Code Duluth GA 30097	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CHC Contracting and Network De	Occupation Provider Contracting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1105.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Bell	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 2126 Inverness Ln	<b>Transaction ID:</b> 20080610-5716-16-49
	City State Zip Code Berwyn PA 19312	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Executive Vice President Chief Financi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

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

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

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

FOR LINE NUMBER: PAGE 9 / 83  
(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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Bell</p> <p>Mailing Address 2126 Inverness Ln</p> <p>City State Zip Code Berwyn PA 19312</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CIGNA CORPORATION Executive Vice President Chief Financi</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">260.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 26 / 2008</span></p> <p><b>Transaction ID:</b> 20080624-5699-11-26</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">20.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Stephanie Bellamy</p> <p>Mailing Address 7260 Wissahickon Avenue</p> <p>City State Zip Code Philadelphia PA 19119</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation FIN Corp Development Financial Analysis Senior Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">325.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 12 / 2008</span></p> <p><b>Transaction ID:</b> 20080610-3987-16-49</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Stephanie Bellamy</p> <p>Mailing Address 7260 Wissahickon Avenue</p> <p>City State Zip Code Philadelphia PA 19119</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation FIN Corp Development Financial Analysis Senior Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">325.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 26 / 2008</span></p> <p><b>Transaction ID:</b> 20080624-3981-11-26</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">70.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kim Bimestefer		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 11 Colts Run Rd		<b>Transaction ID:</b> 20080610-11448-16-49		
	City Princeton	State NJ	Zip Code 08540	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	Aggregate Year-to-Date 325.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Kim Bimestefer		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 11 Colts Run Rd		<b>Transaction ID:</b> 20080624-11414-11-26		
	City Princeton	State NJ	Zip Code 08540	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	Aggregate Year-to-Date 325.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Ellen C. Bonner		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 1403 Greenwood Avenue		<b>Transaction ID:</b> 20080610-19381-16-49		
	City Nashville	State TN	Zip Code 37206	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer L&PA Technology & Business Law	Occupation Senior Counsel	Aggregate Year-to-Date 650.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ellen C. Bonner	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 1403 Greenwood Avenue	<b>Transaction ID:</b> 20080624-19308-11-26
	City State Zip Code Nashville TN 37206	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer L&PA Technology & Business Law	Occupation Senior Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Paul B. Borgesen	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 7022 W Kimberly Way	<b>Transaction ID:</b> 20080610-8101-16-49
	City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 22.04
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Otolaryngologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.52	

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul B. Borgesen	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 7022 W Kimberly Way	<b>Transaction ID:</b> 20080624-8078-11-26
	City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 22.04
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA HEALTHCARE OF AZ, INC	Occupation Otolaryngologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>94.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 385 Deercliff Road

City Avon State CT Zip Code 06001

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

Name of Employer CIGNA Corporation Occupation Svp Service Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1237.00

Date of Receipt: 06 / 12 / 2008  
**Transaction ID:** 20080610-19280-16-49  
 Amount of Each Receipt this Period: 96.00

**B.**

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

Mailing Address 385 Deercliff Road

City Avon State CT Zip Code 06001

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

Name of Employer CIGNA Corporation Occupation Svp Service Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1237.00

Date of Receipt: 06 / 26 / 2008  
**Transaction ID:** 20080624-19208-11-26  
 Amount of Each Receipt this Period: 85.00

**C.**

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

Mailing Address 3651 N Leavitt St

City Chicago State IL Zip Code 60618

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 481.19

Date of Receipt: 06 / 12 / 2008  
**Transaction ID:** 20080610-5810-16-49  
 Amount of Each Receipt this Period: 9.62

**SUBTOTAL** of Receipts This Page (optional) ..... ► 190.62

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 3651 N Leavitt St

City Chicago State IL Zip Code 60618

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 481.19

Date of Receipt 06 / 26 / 2008

Transaction ID: 20080624-5793-11-26

Amount of Each Receipt this Period 9.62

**B.**

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

Mailing Address 611 Shipton Lane

City Bryn Mawr State PA Zip Code 19010

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

Name of Employer CIGNA Internation Occupation Vice President Bfo International

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 377.00

Date of Receipt 06 / 12 / 2008

Transaction ID: 20080610-18770-16-49

Amount of Each Receipt this Period 29.00

**C.**

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

Mailing Address 611 Shipton Lane

City Bryn Mawr State PA Zip Code 19010

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

Name of Employer CIGNA Internation Occupation Vice President Bfo International

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 377.00

Date of Receipt 06 / 26 / 2008

Transaction ID: 20080624-18701-11-26

Amount of Each Receipt this Period 29.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **67.62**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 4619 E White Aster St

City Phoenix State AZ Zip Code 85044

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 ▼ 250.25

Date of Receipt 06 / 12 / 2008  
**Transaction ID: 20080610-3993-16-49**  
Amount of Each Receipt this Period 19.25

**B.**

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

Mailing Address 4619 E White Aster St

City Phoenix State AZ Zip Code 85044

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 ▼ 250.25

Date of Receipt 06 / 26 / 2008  
**Transaction ID: 20080624-3987-11-26**  
Amount of Each Receipt this Period 19.25

**C.**

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

Mailing Address 404 Wild Iris Lane

City Powder Springs State GA Zip Code 30127

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

Name of Employer CHC Natl Southeast Sales  
Occupation Market Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2008  
**Transaction ID: 20080610-19278-16-49**  
Amount of Each Receipt this Period 20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles Carlson	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 404 Wild Iris Lane	<b>Transaction ID:</b> 20080624-19206-11-26
	City State Zip Code Powder Springs GA 30127	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CHC Natl Southeast Sales Market Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William C. Carlson	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 70 Waterside Lane	<b>Transaction ID:</b> 20080610-887-16-49
	City State Zip Code West Hartford CT 06107	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Real Estate Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) William C. Carlson	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 70 Waterside Lane	<b>Transaction ID:</b> 20080624-886-11-26
	City State Zip Code West Hartford CT 06107	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Real Estate Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 517 Wildflower Ln

City State Zip Code  
Media PA 19063

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

Name of Employer Occupation  
CIGNA CORPORATION Human Resources Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-11272-16-49

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 517 Wildflower Ln

City State Zip Code  
Media PA 19063

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

Name of Employer Occupation  
CIGNA CORPORATION Human Resources Senior Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-11237-11-26

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 2 Reed Hill Rd

City State Zip Code  
Granby CT 06035

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Coli

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-481-16-49

Amount of Each Receipt this Period  
90.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert F. Clark		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 2 Reed Hill Rd		<b>Transaction ID:</b> 20080624-480-11-26		
	City Granby	State CT	Zip Code 06035	Amount of Each Receipt this Period 90.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION	Occupation Vice President Coli			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1170.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Stuart J. Cohen		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 99 Hummingbird Dr		<b>Transaction ID:</b> 20080610-15373-16-49		
	City Berlin	State CT	Zip Code 06037	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Learning Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Stuart J. Cohen		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 99 Hummingbird Dr		<b>Transaction ID:</b> 20080624-15326-11-26		
	City Berlin	State CT	Zip Code 06037	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LIFE INS. CO. OF NORTH AMERICA	Occupation Learning Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 83		
	<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher M. Coloian		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 36 Ruth Circle		<b>Transaction ID:</b> 20080610-11652-16-49		
	City Malvern	State PA	Zip Code 19355	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Clinical Program Senior Director	Aggregate Year-to-Date 325.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher M. Coloian		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 36 Ruth Circle		<b>Transaction ID:</b> 20080624-11617-11-26		
	City Malvern	State PA	Zip Code 19355	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Clinical Program Senior Director	Aggregate Year-to-Date 325.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) David M. Cordani		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 32 Lucy Way		<b>Transaction ID:</b> 20080610-589-16-49		
	City Simsbury	State CT	Zip Code 06070	Amount of Each Receipt this Period 120.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation President Cigna Healthcare	Aggregate Year-to-Date 1475.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>170.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.**

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

Mailing Address 32 Lucy Way

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO President Cigna Healthcare

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1475.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-588-11-26

Amount of Each Receipt this Period  
120.00

**B.**

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

Mailing Address 6009 Tiffield Way

City State Zip Code  
Wake Forest NC 27587

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-9218-16-49

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 6009 Tiffield Way

City State Zip Code  
Wake Forest NC 27587

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-9193-11-26

Amount of Each Receipt this Period  
20.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher J. Coxon		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 47 Leigh Gate Road		<b>Transaction ID:</b> 20080610-12039-16-49		
	City Glastonbury	State CT	Zip Code 06033-4174	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION	Occupation Senior Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher J. Coxon		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 47 Leigh Gate Road		<b>Transaction ID:</b> 20080624-12002-11-26		
	City Glastonbury	State CT	Zip Code 06033-4174	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CIGNA CORPORATION	Occupation Senior Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Stephen W. Crawford		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 216 B Avenue		<b>Transaction ID:</b> 20080610-18355-16-49		
	City Coronado	State CA	Zip Code 92118	Amount of Each Receipt this Period 19.25	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CHC Lifesource	Occupation Medical Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 231.00			

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 216 B Avenue

City State Zip Code  
Coronado CA 92118

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

Name of Employer Occupation  
CHC Lifesource Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-18287-11-26

Amount of Each Receipt this Period  
19.25

**B.**

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

Mailing Address 323 Turtle Trl

City State Zip Code  
Lake Mary FL 32746

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-11265-16-49

Amount of Each Receipt this Period  
25.00

**C.**

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

Mailing Address 323 Turtle Trl

City State Zip Code  
Lake Mary FL 32746

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-11230-11-26

Amount of Each Receipt this Period  
25.00

**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: PAGE 22 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 6122 Mccallum St

City Philadelphia State PA Zip Code 19144

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

Name of Employer CIGNA CORPORATION Occupation Vice President Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 12 / 2008  
**Transaction ID:** 20080610-284-16-49  
 Amount of Each Receipt this Period 25.00

**B.**

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

Mailing Address 6122 Mccallum St

City Philadelphia State PA Zip Code 19144

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

Name of Employer CIGNA CORPORATION Occupation Vice President Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 26 / 2008  
**Transaction ID:** 20080624-284-11-26  
 Amount of Each Receipt this Period 25.00

**C.**

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

Mailing Address 17 Swallow Rd

City Holland State PA Zip Code 18966

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

Name of Employer CIGNA CORPORATION Occupation Vice President Investor Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2008  
**Transaction ID:** 20080610-3259-16-49  
 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 23 / 83  
(check only one)

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

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

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

**A.**

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

Mailing Address 17 Swallow Rd

City State Zip Code  
Holland PA 18966

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Investor Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-3253-11-26

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 1715 Morgan Ave S

City State Zip Code  
Minneapolis MN 55405

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-7825-16-49

Amount of Each Receipt this Period  
25.00

**C.**

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

Mailing Address 1715 Morgan Ave S

City State Zip Code  
Minneapolis MN 55405

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-7802-11-26

Amount of Each Receipt this Period  
25.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeannine Doherty		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 1901 E Royal Palm Rd		<b>Transaction ID:</b> 20080610-39-16-49		
	City Phoenix	State AZ	Zip Code 85020	Amount of Each Receipt this Period 7.15	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Senior Account Manager	Aggregate Year-to-Date 253.83		

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeannine Doherty		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 1901 E Royal Palm Rd		<b>Transaction ID:</b> 20080624-39-11-26		
	City Phoenix	State AZ	Zip Code 85020	Amount of Each Receipt this Period 6.25	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Senior Account Manager	Aggregate Year-to-Date 253.83		

<b>C.</b>	Full Name (Last, First, Middle Initial) Daryl W. Edmonds		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 9211 Sand Hill St		<b>Transaction ID:</b> 20080610-8173-16-49		
	City Highlands Ranch	State CO	Zip Code 80126	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	Aggregate Year-to-Date 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>38.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 25 / 83  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

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

Mailing Address 9211 Sand Hill St

City Highlands Ranch State CO Zip Code 80126

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

Name of Employer: CT GENERAL LIFE INSURANCE CO  
Occupation: General Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 26 / 2008  
**Transaction ID:** 20080624-8150-11-26  
 Amount of Each Receipt this Period: 25.00

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

Mailing Address 8228 Academy Rd

City Ellicott City State MD Zip Code 21043

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

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

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 06 / 12 / 2008  
**Transaction ID:** 20080610-129-16-49  
 Amount of Each Receipt this Period: 20.00

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

Mailing Address 8228 Academy Rd

City Ellicott City State MD Zip Code 21043

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

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

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 06 / 26 / 2008  
**Transaction ID:** 20080624-130-11-26  
 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 26 / 83  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Robert Fair

Mailing Address 1758 Boulevard

City State Zip Code  
West Hartford CT 06107

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Investment Managing Director  
CO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-280-16-49

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert Fair

Mailing Address 1758 Boulevard

City State Zip Code  
West Hartford CT 06107

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Investment Managing Director  
CO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-280-11-26

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 817 Wheat Field Drive

City State Zip Code  
Waxhaw NC 28173

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

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

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-16575-16-49

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 27 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kimberly Feltovic		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 905 S. 2nd Street		<b>Transaction ID:</b> 20080624-16527-11-26		
	City Philadelphia	State PA	Zip Code 19147	Amount of Each Receipt this Period 19.25	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer CHC Sales Effectives Staffing	Occupation Account Director	Aggregate Year-to-Date ▼ 250.25		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Staci F. Fernandez		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 15 Dilaj Dr		<b>Transaction ID:</b> 20080610-2381-16-49		
	City Columbia	State CT	Zip Code 06237	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Marketing Comm Director	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Staci F. Fernandez		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 15 Dilaj Dr		<b>Transaction ID:</b> 20080624-2378-11-26		
	City Columbia	State CT	Zip Code 06237	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Marketing Comm Director	Aggregate Year-to-Date ▼ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

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

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

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

FOR LINE NUMBER: PAGE 28 / 83  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Karen E. Ferrell  
 Mailing Address 1005 Chesson Ct  
 City State Zip Code  
 Alpharetta GA 30022  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 1 2 / 2 0 0 8  
**Transaction ID:** 20080610-14638-16-49  
 Amount of Each Receipt this Period  
 85.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE Svp Contr Provid Netwk Med Mgt  
 CO  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1105.00

**B.** Full Name (Last, First, Middle Initial)  
Karen E. Ferrell  
 Mailing Address 1005 Chesson Ct  
 City State Zip Code  
 Alpharetta GA 30022  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 6 / 2 0 0 8  
**Transaction ID:** 20080624-14594-11-26  
 Amount of Each Receipt this Period  
 85.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE Svp Contr Provid Netwk Med Mgt  
 CO  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1105.00

**C.** Full Name (Last, First, Middle Initial)  
David Ferriss  
 Mailing Address 7 Woods Lane  
 City State Zip Code  
 Simsbury CT 06070  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 1 2 / 2 0 0 8  
**Transaction ID:** 20080610-10493-16-49  
 Amount of Each Receipt this Period  
 25.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE Medical Officer  
 CO  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 325.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 195.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 7 Woods Lane

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Medical Officer  
CO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-10458-11-26

Amount of Each Receipt this Period  
25.00

**B.**

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

Mailing Address 135 Timrod Rd

City State Zip Code  
Manchester CT 06040

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-296-16-49

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 135 Timrod Rd

City State Zip Code  
Manchester CT 06040

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-296-11-26

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 30 / 83  
(check only one)

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

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

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

**A.**

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

Mailing Address 5 Brighton Ln

City State Zip Code  
Simsbury CT 06070

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-1111-16-49

Amount of Each Receipt this Period  
90.00

**B.**

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

Mailing Address 5 Brighton Ln

City State Zip Code  
Simsbury CT 06070

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-1110-11-26

Amount of Each Receipt this Period  
90.00

**C.**

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

Mailing Address 1004 Beech Bay Rd

City State Zip Code  
Poplar Grove IL 61065

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-3659-16-49

Amount of Each Receipt this Period  
20.00

**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 31 / 83

(check only one)

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

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

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

**A.**

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

Mailing Address 1004 Beech Bay Rd

City State Zip Code  
Poplar Grove IL 61065

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-3653-11-26

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 31 Lakeshore Dr

City State Zip Code  
Rockaway NJ 07866

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE General Manager  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.25

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-2573-16-49

Amount of Each Receipt this Period  
19.25

**C.**

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

Mailing Address 31 Lakeshore Dr

City State Zip Code  
Rockaway NJ 07866

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE General Manager  
CO

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.25

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-2568-11-26

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: PAGE 32 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 2030 James Farm Rd

City State Zip Code  
Stratford CT 06614

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Senior Account Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
523.82

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 12 / 2008

**Transaction ID:** 20080610-5211-16-49

Amount of Each Receipt this Period  
6.73

**B.**

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

Mailing Address 2030 James Farm Rd

City State Zip Code  
Stratford CT 06614

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

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Senior Account Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
523.82

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2008

**Transaction ID:** 20080624-5199-11-26

Amount of Each Receipt this Period  
6.73

**C.**

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

Mailing Address 7442 Devon St

City State Zip Code  
Philadelphia PA 19119

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

Name of Employer  
CIGNA CORPORATION

Occupation  
Association Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 12 / 2008

**Transaction ID:** 20080610-3803-16-49

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **38.46**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A.**

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

Mailing Address 7442 Devon St

City Philadelphia State PA Zip Code 19119

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

Name of Employer CIGNA CORPORATION Occupation Association Chief Counsel

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 26 / 2008  
**Transaction ID:** 20080624-3797-11-26  
 Amount of Each Receipt this Period: 25.00

**B.**

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

Mailing Address 138 Ballard Dr

City West Hartford State CT Zip Code 06119

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

Name of Employer CIGNA CORPORATION Occupation Strat and Business Develop Senior Dire

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 06 / 12 / 2008  
**Transaction ID:** 20080610-2463-16-49  
 Amount of Each Receipt this Period: 25.00

**C.**

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

Mailing Address 138 Ballard Dr

City West Hartford State CT Zip Code 06119

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

Name of Employer CIGNA CORPORATION Occupation Strat and Business Develop Senior Dire

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 06 / 26 / 2008  
**Transaction ID:** 20080624-2459-11-26  
 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 34 / 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Craig J. Guiffre		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 17 Pheasant Lane		<b>Transaction ID:</b> 20080610-19614-16-49		
	City Scotch Plains	State NJ	Zip Code 07076	Amount of Each Receipt this Period 90.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CGI CGI Executive Staff	Occupation Vice President Sales and Emerging Mkts			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1170.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Craig J. Guiffre		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 17 Pheasant Lane		<b>Transaction ID:</b> 20080624-19540-11-26		
	City Scotch Plains	State NJ	Zip Code 07076	Amount of Each Receipt this Period 90.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CGI CGI Executive Staff	Occupation Vice President Sales and Emerging Mkts			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1170.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Douglas R. Hadley		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 126 Hopmeadow Street		<b>Transaction ID:</b> 20080610-8550-16-49		
	City Weatogue	State CT	Zip Code 06089	Amount of Each Receipt this Period 25.00	
	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) ▼		Aggregate Year-to-Date ▼ 305.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	205.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

**A.**

Full Name (Last, First, Middle Initial) Douglas R. Hadley		Date of Receipt MM / DD / YYYY 06 / 26 / 2008
Mailing Address 126 Hopmeadow Street		<b>Transaction ID:</b> 20080624-8526-11-26
City Weatogue	State CT	
Zip Code 06089		Amount of Each Receipt this Period 25.00
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) ▼	Aggregate Year-to-Date ▼ 305.00	

**B.**

Full Name (Last, First, Middle Initial) H. Hanway		Date of Receipt MM / DD / YYYY 06 / 12 / 2008
Mailing Address 1005 Bent Rd		<b>Transaction ID:</b> 20080610-3719-16-49
City Media	State PA	
Zip Code 19063		Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION	Occupation Chairman and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.90	

**C.**

Full Name (Last, First, Middle Initial) H. Hanway		Date of Receipt MM / DD / YYYY 06 / 26 / 2008
Mailing Address 1005 Bent Rd		<b>Transaction ID:</b> 20080624-3713-11-26
City Media	State PA	
Zip Code 19063		Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA CORPORATION	Occupation Chairman and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.90	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	409.60
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 83  
(check only one)

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

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

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

**A.**

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

Mailing Address 10012 Rough Run Court

City State Zip Code  
Fairfax VA 22039

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-19204-16-49

Amount of Each Receipt this Period  
70.00

**B.**

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

Mailing Address 10012 Rough Run Court

City State Zip Code  
Fairfax VA 22039

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-19133-11-26

Amount of Each Receipt this Period  
70.00

**C.**

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

Mailing Address 135 Brackett Rd

City State Zip Code  
Rye NH 03870

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.12

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-956-16-49

Amount of Each Receipt this Period  
19.24

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 83  
(check only one)

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

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

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

**A.**

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

Mailing Address 135 Brackett Rd

City Rye State NH Zip Code 03870

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.12

Date of Receipt: 06 / 26 / 2008  
**Transaction ID:** 20080624-955-11-26  
Amount of Each Receipt this Period: 19.24

**B.**

Full Name (Last, First, Middle Initial)  
Dale Hovey

Mailing Address 6 Westborough Dr

City Weatogue State CT Zip Code 06089

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 06 / 12 / 2008  
**Transaction ID:** 20080610-1164-16-49  
Amount of Each Receipt this Period: 20.00

**C.**

Full Name (Last, First, Middle Initial)  
Dale Hovey

Mailing Address 6 Westborough Dr

City Weatogue State CT Zip Code 06089

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 06 / 26 / 2008  
**Transaction ID:** 20080624-1162-11-26  
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: (check only one)	PAGE 38 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert J. Hughes	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 120 Shandon PI	<b>Transaction ID:</b> 20080610-1676-16-49
	City Malvern State PA Zip Code 19355	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Svp General Manager, Intl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert J. Hughes	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 120 Shandon PI	<b>Transaction ID:</b> 20080624-1675-11-26
	City Malvern State PA Zip Code 19355	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Svp General Manager, Intl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Abdul-Alim Issa	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 5 Corvette Ct	<b>Transaction ID:</b> 20080610-150-16-49
	City New Castle State DE Zip Code 19720	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation Underwriting Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>65.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 5 Corvette Ct

City State Zip Code  
New Castle DE 19720

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-150-11-26

Amount of Each Receipt this Period  
25.00

**B.**

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

Mailing Address 28 Cedar Meadow Lane

City State Zip Code  
Media PA 19063

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 351.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-17812-16-49

Amount of Each Receipt this Period  
27.00

**C.**

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

Mailing Address 28 Cedar Meadow Lane

City State Zip Code  
Media PA 19063

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 351.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-17750-11-26

Amount of Each Receipt this Period  
27.00

**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 40 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) William S. Jameson	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 690 Bradford St	<b>Transaction ID:</b> 20080610-8764-16-49
	City State Zip Code Pasadena CA 91105	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Association Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William S. Jameson	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 690 Bradford St	<b>Transaction ID:</b> 20080624-8740-11-26
	City State Zip Code Pasadena CA 91105	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Association Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank E. Jones	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 2622 Cedarvue Dr	<b>Transaction ID:</b> 20080624-3952-11-26
	City State Zip Code Upper St Clair PA 15241	Amount of Each Receipt this Period 16.28
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer INT'L REHAB. ASSOCIATES, INC.	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.68	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	66.28
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Scott Josephs		Date of Receipt
	Mailing Address 403 Tramore Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 12 / 2008
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080610-9514-16-49
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Scott Josephs		Date of Receipt
	Mailing Address 403 Tramore Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 26 / 2008
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080624-9487-11-26
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Benjamin W. Katz		Date of Receipt
	Mailing Address 3603a Happy Valley Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 12 / 2008
	City	State	Zip Code
	Lafayette	CA	94549
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080610-8969-16-49
Name of Employer CIGNA HEALTHCARE OF CA, INC.		Occupation Provider Contracting Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 454.00	<input type="text"/> 50.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 83		
	<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Benjamin W. Katz	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 3603a Happy Valley Rd	<b>Transaction ID:</b> 20080624-8945-11-26
	City State Zip Code Lafayette CA 94549	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA HEALTHCARE OF CA, INC. Provider Contracting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 454.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kay L. Kretsch	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 221 Lone Oak Village Way	<b>Transaction ID:</b> 20080610-16897-16-49
	City State Zip Code Nashville TN 37215	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CHC Government Services Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kay L. Kretsch	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 221 Lone Oak Village Way	<b>Transaction ID:</b> 20080624-16844-11-26
	City State Zip Code Nashville TN 37215	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CHC Government Services Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) William P. Lawless	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 509 S Bay Shore Blvd	<b>Transaction ID:</b> 20080610-2369-16-49
	City State Zip Code Gilbert AZ 85233	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC Family Practice Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William P. Lawless	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 509 S Bay Shore Blvd	<b>Transaction ID:</b> 20080624-2366-11-26
	City State Zip Code Gilbert AZ 85233	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC Family Practice Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher R. Loomis	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 909 Overton Ave	<b>Transaction ID:</b> 20080610-5950-16-49
	City State Zip Code Yardley PA 19067	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Association Chief Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 83

(check only one)

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

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

**A.**

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

Mailing Address 909 Overton Ave

City State Zip Code  
Yardley PA 19067

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

Name of Employer Occupation  
CIGNA CORPORATION Association Chief Counsel

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-5933-11-26

Amount of Each Receipt this Period

20.00

**B.**

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

Mailing Address 65 Joanna Way

City State Zip Code  
Short Hills NJ 07078

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.25

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-17888-16-49

Amount of Each Receipt this Period

19.25

**C.**

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

Mailing Address 65 Joanna Way

City State Zip Code  
Short Hills NJ 07078

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.25

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-17825-11-26

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 45 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Carla C. Mangiafico		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 47 Kelsey Ln		<b>Transaction ID:</b> 20080610-329-16-49		
	City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 19.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Accounting Senior Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 247.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Carla C. Mangiafico		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 47 Kelsey Ln		<b>Transaction ID:</b> 20080624-328-11-26		
	City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 19.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Accounting Senior Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 247.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Lance D. Marshall		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 316 Cornerstone Drive		<b>Transaction ID:</b> 20080610-15523-16-49		
	City Chattanooga	State TN	Zip Code 37421	Amount of Each Receipt this Period 21.15	
	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) ▼		Aggregate Year-to-Date ▼ 274.95			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	59.15
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Lance D. Marshall	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 316 Cornerstone Drive	<b>Transaction ID:</b> 20080624-15477-11-26
	City State Zip Code Chattanooga TN 37421	Amount of Each Receipt this Period 21.15
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.95	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas J. Martel	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 23 Tack Ct	<b>Transaction ID:</b> 20080610-13409-16-49
	City State Zip Code Edgewater MD 21037	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas J. Martel	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 23 Tack Ct	<b>Transaction ID:</b> 20080624-13368-11-26
	City State Zip Code Edgewater MD 21037	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>71.15</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 83

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)

John W. Matheny

Mailing Address 43 S Taylor Point Dr

City State Zip Code  
The Woodlands TX 77382

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 221.57

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-5500-16-49

Amount of Each Receipt this Period  
17.31

**B.**

Full Name (Last, First, Middle Initial)

John W. Matheny

Mailing Address 43 S Taylor Point Dr

City State Zip Code  
The Woodlands TX 77382

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 221.57

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-5485-11-26

Amount of Each Receipt this Period  
17.31

**C.**

Full Name (Last, First, Middle Initial)

Kymberly P. Miranda

Mailing Address 5633 Nw 88th Ter

City State Zip Code  
Coral Springs FL 33067

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-5998-16-49

Amount of Each Receipt this Period  
20.00

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

54.62

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

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

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

FOR LINE NUMBER: PAGE 48 / 83  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 5633 Nw 88th Ter

City State Zip Code  
Coral Springs FL 33067

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-5981-11-26

Amount of Each Receipt this Period  
20.00

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

Mailing Address 105 Mill View Ln

City State Zip Code  
Newtown Square PA 19073

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-14302-16-49

Amount of Each Receipt this Period  
100.00

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

Mailing Address 105 Mill View Ln

City State Zip Code  
Newtown Square PA 19073

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-14259-11-26

Amount of Each Receipt this Period  
100.00

**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 49 / 83  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Daniel Nicoll

Mailing Address 4 Bayview Dr

City Plainview State NY Zip Code 11803

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 ▼ 350.09

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-2516-16-49

Amount of Each Receipt this Period  
 26.93

**B.**

Full Name (Last, First, Middle Initial)  
Daniel Nicoll

Mailing Address 4 Bayview Dr

City Plainview State NY Zip Code 11803

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 ▼ 350.09

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-2511-11-26

Amount of Each Receipt this Period  
 26.93

**C.**

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

Mailing Address 34 Sherman Dr

City Malvern State PA Zip Code 19355

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1105.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-11287-16-49

Amount of Each Receipt this Period  
 85.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **138.86**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffery L. Novak	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 6 / 2 0 0 8
	Mailing Address 34 Sherman Dr	<b>Transaction ID:</b> 20080624-11252-11-26
	City Malvern State PA Zip Code 19355	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Vice President Oper Effectiveness & Pr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1105.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen C. Parham	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 6 / 2 0 0 8
	Mailing Address 201 Willoughby Blvd.	<b>Transaction ID:</b> 20080624-13070-11-26
	City Greensboro State NC Zip Code 27408	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Charlene Parsons	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 2 / 2 0 0 8
	Mailing Address 1179 Colts Ln	<b>Transaction ID:</b> 20080610-14878-16-49
	City Yardley State PA Zip Code 19067	Amount of Each Receipt this Period 90.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Vice President Talent Optimization	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1170.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 83

(check only one)

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

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

**A.**

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

Mailing Address 1179 Colts Ln

City State Zip Code  
Yardley PA 19067

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Talent Optimization

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1170.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-14833-11-26

Amount of Each Receipt this Period

90.00

**B.**

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

Mailing Address 4 Thistle Hollow

City State Zip Code  
Avon CT 06001

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Svp Reinsurance

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-574-16-49

Amount of Each Receipt this Period

40.00

**C.**

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

Mailing Address 4 Thistle Hollow

City State Zip Code  
Avon CT 06001

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Svp Reinsurance

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-573-11-26

Amount of Each Receipt this Period

40.00

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

170.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 52 / 83</span> (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) John R. Perlstein</p> <p>Mailing Address 19 Clover Ln</p> <p>City State Zip Code Manchester CT 06040</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CIGNA CORPORATION Vice President Chief Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1105.00</span></p>	<p>Date of Receipt MM / DD / YYYY 06 / 12 / 2008</p> <p><b>Transaction ID:</b> 20080610-2082-16-49</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">85.00</span></p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) John R. Perlstein</p> <p>Mailing Address 19 Clover Ln</p> <p>City State Zip Code Manchester CT 06040</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CIGNA CORPORATION Vice President Chief Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1105.00</span></p>	<p>Date of Receipt MM / DD / YYYY 06 / 26 / 2008</p> <p><b>Transaction ID:</b> 20080624-2079-11-26</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">85.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Carol Petren</p> <p>Mailing Address The Ayer - #10 SW</p> <p>City State Zip Code Philadelphia PA 19106-3581</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation ADM CEO Staff E.V.P. Genl Counsel &amp; Pub Affairs</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2496.00</span></p>	<p>Date of Receipt MM / DD / YYYY 06 / 12 / 2008</p> <p><b>Transaction ID:</b> 20080610-17719-16-49</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">192.00</span></p>
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<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p><span style="border: 1px solid black; padding: 2px;">362.00</span></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><span style="border: 1px solid black; padding: 2px;"> </span></p>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 83

(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Carol Petren

Mailing Address The Ayer - #10 SW

City State Zip Code  
Philadelphia PA 19106-3581

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

Name of Employer Occupation  
ADM CEO Staff E.V.P. Genl Counsel & Pub Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2496.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-17658-11-26

Amount of Each Receipt this Period  
192.00

**B.**

Full Name (Last, First, Middle Initial)  
Charles C. Pitts

Mailing Address 622 Museum Drive

City State Zip Code  
Charlotte NC 28207

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

Name of Employer Occupation  
CHC Middle Market Segment 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  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-18711-16-49

Amount of Each Receipt this Period  
19.23

**C.**

Full Name (Last, First, Middle Initial)  
Charles C. Pitts

Mailing Address 622 Museum Drive

City State Zip Code  
Charlotte NC 28207

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

Name of Employer Occupation  
CHC Middle Market Segment 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  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-18643-11-26

Amount of Each Receipt this Period  
19.23

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

230.46

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 24 Magnolia Dr

City State Zip Code  
Suffield CT 06078

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Tax

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-1600-16-49

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 24 Magnolia Dr

City State Zip Code  
Suffield CT 06078

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

Name of Employer Occupation  
CIGNA CORPORATION Vice President Tax

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-1599-11-26

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Michele A. Powers

Mailing Address 318 Hurst Drive

City State Zip Code  
Old Hickory TN 37138

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE CO Operations Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-11753-16-49

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 55 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michele A. Powers		Date of Receipt
	Mailing Address 318 Hurst Drive		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Old Hickory	TN	37138
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080624-11717-11-26
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Operations Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.25"/>	<input type="text" value="19.25"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas F. Prevost		Date of Receipt
	Mailing Address 13 Deer Run		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Southwick	MA	01077
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080610-404-16-49
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Aviation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.25"/>	<input type="text" value="19.25"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas F. Prevost		Date of Receipt
	Mailing Address 13 Deer Run		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Southwick	MA	01077
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080624-403-11-26
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Aviation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.25"/>	<input type="text" value="19.25"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="57.75"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 360 W Point Rd

City State Zip Code  
Tonka Bay MN 55331

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-2204-16-49

Amount of Each Receipt this Period  
25.00

**B.**

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

Mailing Address 360 W Point Rd

City State Zip Code  
Tonka Bay MN 55331

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-2201-11-26

Amount of Each Receipt this Period  
25.00

**C.**

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

Mailing Address 622 Georgia Ave # 307

City State Zip Code  
Chattanooga TN 37402

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-14792-16-49

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 57 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael J. Raybeck	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 622 Georgia Ave # 307	<b>Transaction ID:</b> 20080624-14748-11-26
	City State Zip Code Chattanooga TN 37402	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INT'L REHAB. ASSOCIATES, INC. Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.25	

<b>B.</b>	Full Name (Last, First, Middle Initial) William J. Reedy	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 1539 E Hackamore St	<b>Transaction ID:</b> 20080610-7874-16-49
	City State Zip Code Mesa AZ 85203	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC. Urgent Care Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) William J. Reedy	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 1539 E Hackamore St	<b>Transaction ID:</b> 20080624-7851-11-26
	City State Zip Code Mesa AZ 85203	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC. Urgent Care Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas B. Richards	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 3 Scarborough Farms Rd	<b>Transaction ID:</b> 20080610-808-16-49
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Vice President Product Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas B. Richards	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 3 Scarborough Farms Rd	<b>Transaction ID:</b> 20080624-807-11-26
	City State Zip Code Simsbury CT 06070	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Vice President Product Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Karen S. Rohan	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address PO Box 570	<b>Transaction ID:</b> 20080610-177-16-49
	City State Zip Code North Falmouth MA 02556	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation President Group, Dental & Vis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 83  
(check only one)

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

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

**A.**

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

Mailing Address PO Box 570

City State Zip Code  
North Falmouth MA 02556

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-177-11-26

Amount of Each Receipt this Period  
50.00

**B.**

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

Mailing Address 147 Old Gulph Rd

City State Zip Code  
Wynnewood PA 19096

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AM- Vice President Marketing  
ERICA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1248.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-12937-16-49

Amount of Each Receipt this Period  
96.00

**C.**

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

Mailing Address 147 Old Gulph Rd

City State Zip Code  
Wynnewood PA 19096

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AM- Vice President Marketing  
ERICA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1248.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-12896-11-26

Amount of Each Receipt this Period  
96.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **242.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 83  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Jonathan N. Rubin

Mailing Address 108 W Mountain Rd

City State Zip Code  
West Simsbury CT 06092

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Svp Bfo  
CO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1105.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-1431-16-49

Amount of Each Receipt this Period  
85.00

**B.**

Full Name (Last, First, Middle Initial)  
Jonathan N. Rubin

Mailing Address 108 W Mountain Rd

City State Zip Code  
West Simsbury CT 06092

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE Svp Bfo  
CO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1105.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-1429-11-26

Amount of Each Receipt this Period  
85.00

**C.**

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

Mailing Address 73 Cidermill Hts

City State Zip Code  
North Granby CT 06060

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

Name of Employer Occupation  
CT GENERAL LIFE INSURANCE General Manager  
CO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-301-16-49

Amount of Each Receipt this Period  
19.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► **189.25**

**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 61 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jean C. Rush		Date of Receipt	
	Mailing Address 73 Cidermill Hts		M M / D D / Y Y Y Y Y 0 6 / 2 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080624-300-11-26
	North Granby	CT	06060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		19.25	
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation General Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.25		

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard B. Salmon		Date of Receipt	
	Mailing Address 5 Hawks Rdg		M M / D D / Y Y Y Y Y 0 6 / 1 2 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080610-2385-16-49
	Avon	CT	06001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		30.00	
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard B. Salmon		Date of Receipt	
	Mailing Address 5 Hawks Rdg		M M / D D / Y Y Y Y Y 0 6 / 2 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 20080624-2382-11-26
	Avon	CT	06001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		30.00	
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation Medical Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	79.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) David N. Sasportas	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 125 Wadhams Rd	<b>Transaction ID:</b> 20080610-503-16-49
	City Bloomfield State CT Zip Code 06002	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation App Development Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) David N. Sasportas	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 125 Wadhams Rd	<b>Transaction ID:</b> 20080624-502-11-26
	City Bloomfield State CT Zip Code 06002	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation App Development Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank Sataline	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 18 Wyndham Ln	<b>Transaction ID:</b> 20080610-575-16-49
	City Farmington State CT Zip Code 06032	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Vice President Senior Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1105.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Frank Sataline	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 18 Wyndham Ln	<b>Transaction ID:</b> 20080624-574-11-26
	City State Zip Code Farmington CT 06032	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CT GENERAL LIFE INSURANCE CO Vice President Senior Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1105.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) David A. Savino	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 91 Trumbull Ln	<b>Transaction ID:</b> 20080610-756-16-49
	City State Zip Code South Windsor CT 06074	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Claims Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) David A. Savino	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 91 Trumbull Ln	<b>Transaction ID:</b> 20080624-755-11-26
	City State Zip Code South Windsor CT 06074	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CIGNA CORPORATION Claims Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 400 Kings Highway

City State Zip Code  
Moorestown NJ 08057

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-1688-16-49

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 400 Kings Highway

City State Zip Code  
Moorestown NJ 08057

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-1687-11-26

Amount of Each Receipt this Period  
20.00

**C.**

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

Mailing Address 717 Haviland Dr

City State Zip Code  
Bryn Mawr PA 19010

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

Name of Employer Occupation  
CIGNA CORPORATION Svp Treasury

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-7142-16-49

Amount of Each Receipt this Period  
30.00

**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 65 / 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard J. Shube	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 1975 E. Belleview Ln.	<b>Transaction ID:</b> 20080610-20241-16-49
	City State Zip Code Greenwood Village CO 80121	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation CGI Sales Sales Director-Direct Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.25	

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard J. Shube	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 1975 E. Belleview Ln.	<b>Transaction ID:</b> 20080624-20169-11-26
	City State Zip Code Greenwood Village CO 80121	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation CGI Sales Sales Director-Direct Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.25	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael D. Slice	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 19422 N 73rd Ave	<b>Transaction ID:</b> 20080610-4718-16-49
	City State Zip Code Glendale AZ 85308	Amount of Each Receipt this Period 19.25
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation CIGNA HEALTHCARE OF AZ, INC Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.25	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>57.75</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael D. Slice		Date of Receipt
	Mailing Address 19422 N 73rd Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 26 / 2008
	City	State	Zip Code
	Glendale	AZ	85308
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080624-4709-11-26
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation Operations Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 250.25	<input type="text"/> 19.25

<b>B.</b>	Full Name (Last, First, Middle Initial) Donald R. Spelhaug		Date of Receipt
	Mailing Address 5710 W Arrowhead Lakes Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 12 / 2008
	City	State	Zip Code
	Glendale	AZ	85308
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080610-7936-16-49
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation Family Practice	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 260.00	<input type="text"/> 20.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Donald R. Spelhaug		Date of Receipt
	Mailing Address 5710 W Arrowhead Lakes Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 26 / 2008
	City	State	Zip Code
	Glendale	AZ	85308
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20080624-7913-11-26
Name of Employer CIGNA HEALTHCARE OF AZ, INC		Occupation Family Practice	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 260.00	<input type="text"/> 20.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 660 St. Johns Drive

City State Zip Code  
Orange CT 06477

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

Name of Employer Occupation  
CHC Senior Segment Rvp Segment Lead

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-16069-16-49

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 660 St. Johns Drive

City State Zip Code  
Orange CT 06477

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

Name of Employer Occupation  
CHC Senior Segment Rvp Segment Lead

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-16022-11-26

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Otha T. Spriggs

Mailing Address 235 Ansley Close

City State Zip Code  
Roswell GA 30075

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1105.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-11537-16-49

Amount of Each Receipt this Period  
85.00

**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: PAGE 68 / 83  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Otha T. Spriggs

Mailing Address 235 Ansley Close

City Roswell State GA Zip Code 30075

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 06 / 26 / 2008

**Transaction ID:** 20080624-11503-11-26

Amount of Each Receipt this Period 85.00

**B.**

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

Mailing Address 4144 Central Ave

City Indianapolis State IN Zip Code 46205

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 565.85

Date of Receipt 06 / 12 / 2008

**Transaction ID:** 20080610-5305-16-49

Amount of Each Receipt this Period 9.17

**C.**

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

Mailing Address 4144 Central Ave

City Indianapolis State IN Zip Code 46205

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 565.85

Date of Receipt 06 / 26 / 2008

**Transaction ID:** 20080624-5291-11-26

Amount of Each Receipt this Period 6.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.42

**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 69 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 69 W 9th St

City State Zip Code  
New York NY 10011

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 ▼ 250.25

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-9983-16-49

Amount of Each Receipt this Period  
19.25

**B.**

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

Mailing Address 69 W 9th St

City State Zip Code  
New York NY 10011

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 ▼ 250.25

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-9950-11-26

Amount of Each Receipt this Period  
19.25

**C.**

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

Mailing Address 27 Sunny Heights Rd

City State Zip Code  
Granby CT 06035

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-15148-16-49

Amount of Each Receipt this Period  
20.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 27 Sunny Heights Rd

City State Zip Code  
Granby CT 06035

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-15103-11-26

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Shelly Swinford

Mailing Address 5 Pinnacle Mountain Rd

City State Zip Code  
Simsbury CT 06070

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.68

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-5264-11-26

Amount of Each Receipt this Period  
16.35

**C.**

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

Mailing Address 9556 E Cortez St

City State Zip Code  
Scottsdale AZ 85260

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-10671-16-49

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **56.35**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 83  
(check only one)

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

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

**A.**

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

Mailing Address 9556 E Cortez St

City State Zip Code  
Scottsdale AZ 85260

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-10636-11-26

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 522 E Commerce St

City State Zip Code  
Milford MI 48381

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.12

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** 20080610-5980-16-49

Amount of Each Receipt this Period  
13.40

**C.**

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

Mailing Address 522 E Commerce St

City State Zip Code  
Milford MI 48381

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.12

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2008

**Transaction ID:** 20080624-5963-11-26

Amount of Each Receipt this Period  
17.42

**SUBTOTAL** of Receipts This Page (optional) ..... ► **50.82**

**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 72 / 83

(check only one)

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

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

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

**A.**

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

Mailing Address Po Box 241

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CIGNA CORPORATION Compliance Senior Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-877-16-49

Amount of Each Receipt this Period

20.00

**B.**

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

Mailing Address Po Box 241

City State Zip Code  
Simsbury CT 06070

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

Name of Employer Occupation  
CIGNA CORPORATION Compliance Senior Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-876-11-26

Amount of Each Receipt this Period

20.00

**C.**

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

Mailing Address 1409 Vassar St

City State Zip Code  
Houston TX 77006

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 389.09

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-9858-16-49

Amount of Each Receipt this Period

29.93

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

69.93

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Brian Wallach	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 1409 Vassar St	<b>Transaction ID:</b> 20080624-9825-11-26
	City State Zip Code Houston TX 77006	Amount of Each Receipt this Period 29.93
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.09	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph M. Walter	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 510 Larkins Bridge Dr	<b>Transaction ID:</b> 20080610-12107-16-49
	City State Zip Code Downingtown PA 19335	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Financial Analysis Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph M. Walter	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 510 Larkins Bridge Dr	<b>Transaction ID:</b> 20080624-12070-11-26
	City State Zip Code Downingtown PA 19335	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CIGNA CORPORATION	Occupation Financial Analysis Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	69.93
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 83  
(check only one)

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

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

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

**A.**

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

Mailing Address 1813 Shadywood Ct

City State Zip Code  
Chesterfield MO 63017

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AM- Senior Account Manager  
ERICA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 592.11

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-5767-16-49

Amount of Each Receipt this Period  
16.35

**B.**

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

Mailing Address 1813 Shadywood Ct

City State Zip Code  
Chesterfield MO 63017

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

Name of Employer Occupation  
LIFE INS. CO. OF NORTH AM- Senior Account Manager  
ERICA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 592.11

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** 20080624-5750-11-26

Amount of Each Receipt this Period  
16.35

**C.**

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

Mailing Address 585 Country Club Rd

City State Zip Code  
Avon CT 06001

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** 20080610-14853-16-49

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 52.70

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher J. Whelan	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 585 Country Club Rd	<b>Transaction ID:</b> 20080624-14808-11-26
	City Avon State CT Zip Code 06001	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Financial Analysis Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard M. White	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 68 Longwood Dr	<b>Transaction ID:</b> 20080610-2353-16-49
	City Portland State ME Zip Code 04102	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard M. White	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 68 Longwood Dr	<b>Transaction ID:</b> 20080624-2350-11-26
	City Portland State ME Zip Code 04102	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Provider Contracting Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Rebekah C. Whitehouse		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 2640 W Tulsa St		<b>Transaction ID:</b> 20080610-11463-16-49		
	City Chandler	State AZ	Zip Code 85224	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Vice President Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Rebekah C. Whitehouse		Date of Receipt MM / DD / YYYY 06 / 26 / 2008		
	Mailing Address 2640 W Tulsa St		<b>Transaction ID:</b> 20080624-11429-11-26		
	City Chandler	State AZ	Zip Code 85224	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Vice President Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Lance Wilkes		Date of Receipt MM / DD / YYYY 06 / 12 / 2008		
	Mailing Address 6 Langley Park		<b>Transaction ID:</b> 20080610-10982-16-49		
	City Farmington	State CT	Zip Code 06032	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Name of Employer CT GENERAL LIFE INSURANCE CO Occupation Financial Strategy Senior Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Lance Wilkes	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 6 Langley Park	<b>Transaction ID:</b> 20080624-10947-11-26
	City State Zip Code Farmington CT 06032	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Financial Strategy Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Allen R. Woolf	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 273 N Easton Rd	<b>Transaction ID:</b> 20080610-1406-16-49
	City State Zip Code Glenside PA 19038	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Allen R. Woolf	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 273 N Easton Rd	<b>Transaction ID:</b> 20080624-1404-11-26
	City State Zip Code Glenside PA 19038	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 83

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Bu Yang

Mailing Address 121 High Wood Dr

City State Zip Code  
South Glastonbury CT 06073

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

Name of Employer  
CT GENERAL LIFE INSURANCE  
CO

Occupation  
Architecture Senior Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274.95

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-10630-16-49

Amount of Each Receipt this Period

21.15

B.

Full Name (Last, First, Middle Initial)

Bu Yang

Mailing Address 121 High Wood Dr

City State Zip Code  
South Glastonbury CT 06073

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

Name of Employer  
CT GENERAL LIFE INSURANCE  
CO

Occupation  
Architecture Senior Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274.95

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: 20080624-10595-11-26

Amount of Each Receipt this Period

21.15

C.

Full Name (Last, First, Middle Initial)

John Young

Mailing Address 18420 29th Avenue North

City State Zip Code  
Plymouth MN 55447

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

Name of Employer  
CHC Middle Market Sales

Occupation  
Account Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: 20080610-17383-16-49

Amount of Each Receipt this Period

20.00

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

62.30

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 79 / 83	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) John Young		Date of Receipt	
Mailing Address 18420 29th Avenue North		M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 8	
City Plymouth	State MN	Zip Code 55447	Transaction ID: 20080624-17324-11-26
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00	
Name of Employer CHC Middle Market Sales	Occupation Account Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) .....	20.00
TOTAL This Period (last page this line number only) .....	7764.31

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Congressman Bart Gordon Committee <hr/> Mailing Address PO Box 2008 <hr/> City Murfreesboro State TN Zip Code 37133 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Bart Gordon <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 95ffd1f15656672dabf Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Roy Blunt <hr/> Mailing Address PO Box 50100 <hr/> City Springfield State MO Zip Code 65805 <hr/> Purpose of Disbursement 2008 Primary Candidate Name Roy D. Blunt <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: f8783b5b261aeae66db Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) National Republican Senatorial Committee <hr/> Mailing Address 425 Second Street NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement 2008 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 71e403457699242c4a0 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 2250.00
	Category/ Type 011
	Contribution

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

6750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 81 / 83

<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

A.

Full Name (Last, First, Middle Initial)  
Paul Hodes for Congress

Transaction ID: 8b095b4060a446f80ee

Date of Disbursement

Mailing Address 26 South Main Street, #253

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	8

City State Zip Code  
Concord NH 03301

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
2008 Primary

011
Category/ Type

Candidate Name  
Paul W. Hodes

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NH District: 02

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

1000.00
---------

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

7750.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Charlotte Burks for Senate <hr/> Mailing Address PO Box 695 <hr/> City Cookeville State TN Zip Code 38503 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 41395-10412234067916 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period -300.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Steve Southerland <hr/> Mailing Address 4648 Harbor Drive <hr/> City Morristown State TN Zip Code 37814 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 41395-63920229673386 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period -350.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Tim Burchett <hr/> Mailing Address 8220 Bennington Drive <hr/> City Knoxville State TN Zip Code 37090 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 41395-04839724302291 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period -300.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

-950.00

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

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ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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PAGE 83 / 83

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

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

A.

Full Name (Last, First, Middle Initial)

Taxpayers for Tom Knox

Mailing Address Post Office Box 4997

City State Zip Code  
Canton GA 30114

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 403aabdcc39ff41afa0

Date of Disbursement

06 / 12 / 2008

Amount of Each Disbursement this Period

500.00

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

500.00

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

-450.00