

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  
 Aetna Inc. Political Action Committee

ADDRESS (number and street) 151 Farmington Ave.  
 RW4A  
 Check if different than previously reported. (ACC)  
 Hartford CT 06156

2. FEC IDENTIFICATION NUMBER C00181826  
 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 02 01 2008 through 02 29 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 Mr. Jonathan Topodas

Signature of Treasurer Electronically Filed by Mr. Jonathan Topodas

Date 03 24 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)
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Aetna Inc. Political Action Committee

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	2

D	D
2	9

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		240207.64
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	232685.58									
(c) Total Receipts (from Line 19) .....	31272.51	65400.45								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	263958.09	305608.09								
7. Total Disbursements (from Line 31) .....	29000.00	70650.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	234958.09	234958.09								
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  
Aetna Inc. Political Action Committee

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	2

D	D
2	9

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	21328.80	42233.10
(i) Itemized (use Schedule A) .....	9943.71	23167.35
(ii) Unitemized .....	31272.51	65400.45
(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) .....	31272.51	65400.45
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	0.00
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)) .....	31272.51	65400.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	31272.51	65400.45

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29000.00	69000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	1650.00
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))..	29000.00	70650.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29000.00	70650.00

**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) .....	31272.51	65400.45
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	31272.51	65400.45
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 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Beth E. Andersen

Mailing Address 3330 Vaughn Road

City State Zip Code  
Lafayette CA 94549-1950

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

Name of Employer Occupation  
Aetna Inc. General Manager, Asm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-106

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
Raymond J. Arroyo

Mailing Address 14 Michelle Lane

City State Zip Code  
Avon CT 06001-3267

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

Name of Employer Occupation  
Aetna Inc. Head of Diversity

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-29

Amount of Each Receipt this Period  
150.00

**C.**

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

Mailing Address 2008 West Cavendish Court

City State Zip Code  
Alpharetta GA 30022-7121

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

Name of Employer Occupation  
Aetna Inc. Hd Natl Producer Relations Asm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-254

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **425.00**

**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 7 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Katharine N. Begley

Mailing Address 2042 General Alexander Drive

City Malvern State PA Zip Code 19355-9799

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

Name of Employer Aetna Inc. Occupation General Manager, Asm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 334.00

Date of Receipt 02 / 22 / 2008

**Transaction ID:** 021908-224

Amount of Each Receipt this Period 167.00

**B.** Full Name (Last, First, Middle Initial)  
Maria Beltramello

Mailing Address 160 Watertown Road PO Box 133

City Middlebury State CT Zip Code 06762-0133

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

Name of Employer Aetna Inc. Occupation Sr Mgr Strategy & Product Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt 02 / 22 / 2008

**Transaction ID:** 021908-37

Amount of Each Receipt this Period 162.50

**C.** Full Name (Last, First, Middle Initial)  
Dana M. Benbow

Mailing Address 32 Karen Place

City Budd Lake State NJ Zip Code 07828-1021

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

Name of Employer Aetna Inc. Occupation Hd Life & Ltc Products & Svcs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 22 / 2008

**Transaction ID:** 021908-282

Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **454.50**

**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 8 / 36
	<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)  
Aetna Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
John J. Bermel

Mailing Address 237 Old Farms Road

City State Zip Code  
Simsbury CT 06070-1533

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

Name of Employer Occupation  
Aetna Inc. CFO, Regional Businesses

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-219

Amount of Each Receipt this Period  
416.66

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

Mailing Address 11 Robkins Road

City State Zip Code  
Avon CT 06001-2880

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

Name of Employer Occupation  
Aetna Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-271

Amount of Each Receipt this Period  
416.66

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

Mailing Address 80 East End Avenue  
Apt. 11D

City State Zip Code  
New York NY 10028-8017

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

Name of Employer Occupation  
Aetna Inc. Segment Head

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 830.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-221

Amount of Each Receipt this Period  
415.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1248.32**

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 36  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Troyen A. Brennan

Mailing Address 164 Balbrae Drive

City State Zip Code  
Bloomfield CT 06002-2158

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

Name of Employer Occupation  
Aetna Inc. Chief Medical Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-58

Amount of Each Receipt this Period  
416.66

**B.** Full Name (Last, First, Middle Initial)  
Tina Brown-Stevenson

Mailing Address 12 Porter Place

City State Zip Code  
Avon CT 06001-2984

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

Name of Employer Occupation  
Aetna Inc. Hd Aetna Integ Informatics

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-323

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Laurie Brubaker

Mailing Address 1418 Danbury Drive

City State Zip Code  
Mansfield TX 76063-3845

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

Name of Employer Occupation  
Aetna Inc. Head of Individual Markets

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-226

Amount of Each Receipt this Period  
337.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 954.16

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Sheryl A. Burke

Mailing Address 53 Chatham Hill

City State Zip Code  
South Glastonbury CT 06073-3543

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

Name of Employer Occupation  
Aetna Inc. Hd Natl Accts Customer Ops

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-118

Amount of Each Receipt this Period  
200.00

**B.**

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

Mailing Address 35 Riverside Road

City State Zip Code  
Simsbury CT 06070-2514

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

Name of Employer Occupation  
Aetna Inc. Head of Corp Communications

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-315

Amount of Each Receipt this Period  
175.00

**C.**

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

Mailing Address 229 Cold Spring Road

City State Zip Code  
Avon CT 06001-4014

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

Name of Employer Occupation  
Aetna Inc. General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-189

Amount of Each Receipt this Period  
416.66

**SUBTOTAL** of Receipts This Page (optional) ..... ► **791.66**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 36
	<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)  
Aetna Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
W. F. Cobbin

Mailing Address 4430 Glen Kernan Parkway, East

City Jacksonville State FL Zip Code 32224-5626

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

Name of Employer Aetna Inc. Occupation Head of Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 812.50

Date of Receipt 02 / 22 / 2008

**Transaction ID:** 021908-297

Amount of Each Receipt this Period 406.25

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

Mailing Address 54 E Wall Street

City Bethlehem State PA Zip Code 18018-6009

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

Name of Employer Aetna Inc. Occupation Head, Clinical Programs & Ops

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 22 / 2008

**Transaction ID:** 021908-314

Amount of Each Receipt this Period 125.00

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

Mailing Address 8 Tillou Court

City South Orange State NJ Zip Code 07079-1358

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

Name of Employer Aetna Inc. Occupation National Medical Director, Na

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 22 / 2008

**Transaction ID:** 021908-301

Amount of Each Receipt this Period 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 931.25

**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 12 / 36  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Russell R. Dickhart

Mailing Address 509 Maplewood Avenue

City State Zip Code  
Wayne PA 19087-4704

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

Name of Employer Occupation  
Aetna Inc. Hd Sales&Operations Govt Sect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-82

Amount of Each Receipt this Period  
416.66

**B.**

Full Name (Last, First, Middle Initial)  
Roberta L. Downey

Mailing Address 28 Freedom Way

City State Zip Code  
Glastonbury CT 06033-2841

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

Name of Employer Occupation  
Aetna Inc. Product Development Head

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-79

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
Patricia A. Farrell

Mailing Address 1149 Kettle Pond Lane

City State Zip Code  
Great Falls VA 22066-1608

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

Name of Employer Occupation  
Aetna Inc. Head Natl Accts, Agb, Medicaid

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-165

Amount of Each Receipt this Period  
416.66

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1033.32**

**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 / 36

(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Michael W. Fedyna

Mailing Address 1836 Howe Lane

City State Zip Code  
Maple Glen PA 19002-2915

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

Name of Employer Occupation  
Aetna Inc. Head Actuary

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 812.50

Date of Receipt

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

Transaction ID: 021908-74

Amount of Each Receipt this Period

406.25

**B.**

Full Name (Last, First, Middle Initial)  
Daniel R. Fishbein

Mailing Address 19 Salt Spray Lane

City State Zip Code  
Cpe Elizabeth ME 04107-2914

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

Name of Employer Occupation  
Aetna Inc. Head of Health Plan Alliances

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 416.66

Date of Receipt

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

Transaction ID: 021908-266

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)  
Mary Fox

Mailing Address 1060 Prospect Avenue

City State Zip Code  
Hartford CT 06105-1125

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

Name of Employer Occupation  
Aetna Inc. Hd of Product Group

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 800.00

Date of Receipt

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

Transaction ID: 021908-77

Amount of Each Receipt this Period

400.00

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

1014.58

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.**

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

Mailing Address 420 Bowen Drive

City State Zip Code  
Exton PA 19341-2358

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

Name of Employer Occupation  
Aetna Inc. Region Head, Health Care Deliv

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-223

Amount of Each Receipt this Period  
350.00

**B.**

Full Name (Last, First, Middle Initial)  
Phillip J. Haas

Mailing Address 4515 145th Place Southeast

City State Zip Code  
Bellevue WA 98006-2479

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

Name of Employer Occupation  
Aetna Inc. Network Market Head

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

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-175

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
Frederick R. Hatfield

Mailing Address 1392 West Indigo Drive

City State Zip Code  
Chandler AZ 85248-4384

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

Name of Employer Occupation  
Aetna Inc. Head of Sai Integration

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

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-264

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 36  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
William E. Hauser

Mailing Address 3952 Wieuca Road

City Atlanta State GA Zip Code 30342-4330

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

Name of Employer Aetna Inc. Occupation Se/Sw Reg'l Hd Med/Qual Ops

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 22 / 2008

Transaction ID: 021908-306

Amount of Each Receipt this Period 300.00

**B.**

Full Name (Last, First, Middle Initial)  
Paul Hebert

Mailing Address 14 Winter Village Road

City Granby State CT Zip Code 06035-1130

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

Name of Employer Aetna Inc. Occupation Hd Prov Data Svs/Credentialing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 02 / 22 / 2008

Transaction ID: 021908-156

Amount of Each Receipt this Period 210.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael W. Hudson

Mailing Address 210 Northington Drive

City Avon State CT Zip Code 06001-2359

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

Name of Employer Aetna Inc. Occupation Region Head, Health Care Deliv

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 22 / 2008

Transaction ID: 021908-296

Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **635.00**

**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 16 / 36

(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Charlyn A. Iovino

Mailing Address 1823 Solitaire Ln

City State Zip Code  
Mc Lean VA 22101-4235

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

Name of Employer Occupation  
Aetna Inc. Lobbyist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 550.00

Date of Receipt

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

Transaction ID: 021908-322

Amount of Each Receipt this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)  
Christopher L. Jagmin

Mailing Address 8181 Douglas Avenue

City State Zip Code  
Dallas TX 75225-6561

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

Name of Employer Occupation  
Aetna Inc. Medical Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 384.00

Date of Receipt

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

Transaction ID: 021908-256

Amount of Each Receipt this Period

192.00

**C.**

Full Name (Last, First, Middle Initial)  
Allen Karp

Mailing Address 32 Rampart Drive

City State Zip Code  
Glastonbury CT 06033-3366

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

Name of Employer Occupation  
Aetna Inc. Head of Health Care Delivery

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 688.00

Date of Receipt

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

Transaction ID: 021908-210

Amount of Each Receipt this Period

344.00

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

**811.00**

**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 17 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Kim A. Keck

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Mailing Address 3 Buena Vista Road

Transaction ID: 021908-158

City West Hartford State CT Zip Code 06107-2912

Amount of Each Receipt this Period  
210.00

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

Name of Employer Aetna Inc. Occupation Chf of Staff-Chrmn, CEO & Pres

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

**B.**

Full Name (Last, First, Middle Initial)  
Charles H. Klippel

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Mailing Address 120 Henley Way

Transaction ID: 021908-101

City Avon State CT Zip Code 06001-4072

Amount of Each Receipt this Period  
416.66

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

Name of Employer Aetna Inc. Occupation Deputy General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

**C.**

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

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Mailing Address 14477 Riverside Drive

Transaction ID: 021908-50

City Ashland State VA Zip Code 23005-3176

Amount of Each Receipt this Period  
125.00

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

Name of Employer Aetna Inc. Occupation Regional Head of Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **751.66**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Randall Krakauer

Mailing Address 29 Lorrie Lane

City State Zip Code  
West Windsor NJ 08550-5112

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

Name of Employer Occupation  
Aetna Inc. National Medical Director, Cs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-9

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
William I. Kramer

Mailing Address 45 Oakwood Drive

City State Zip Code  
Dresher PA 19025-2007

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

Name of Employer Occupation  
Aetna Inc. Dpty Chief Legal Health Deliv

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-235

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Steven G. Logan

Mailing Address 15 Gray Rock Lane

City State Zip Code  
Chappaqua NY 10514-2511

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

Name of Employer Occupation  
Aetna Inc. General Manager, Asm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-127

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 36
	<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)  
Aetna Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Sibongile Magubane	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 54 Goodwin Circle	<b>Transaction ID:</b> 021908-98
	City State Zip Code Hartford CT 06105-5206	Amount of Each Receipt this Period 153.33
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Aetna Inc.	Occupation Head, Finance Info Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.66	

<b>B.</b>	Full Name (Last, First, Middle Initial) John D. Mahder	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 44 Carroll Rd	<b>Transaction ID:</b> 021908-85
	City State Zip Code Fairfield CT 06824-3068	Amount of Each Receipt this Period 416.66
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Aetna Inc.	Occupation Hd Strat Mktg Consumer Insight	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 566.66	

<b>C.</b>	Full Name (Last, First, Middle Initial) Janet S. Mann	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 10 Deerfield Trace	<b>Transaction ID:</b> 021908-298
	City State Zip Code Burlington CT 06013-1514	Amount of Each Receipt this Period 168.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Aetna Inc.	Occupation Head of Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>737.99</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 20 / 36  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Paul E. Marchetti  
 Mailing Address 240 Putting Green Road  
 City State Zip Code  
 Trumbull CT 06611-2505  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 2 2 / 2 0 0 8  
**Transaction ID:** 021908-47  
 Amount of Each Receipt this Period  
 150.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Aetna Inc. Natl Network Contract Svc Head  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

**B.** Full Name (Last, First, Middle Initial)  
Meg A. McCabe  
 Mailing Address 191 Walden Street  
 City State Zip Code  
 West Hartford CT 06107-1744  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 2 2 / 2 0 0 8  
**Transaction ID:** 021908-21  
 Amount of Each Receipt this Period  
 150.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Aetna Inc. Product Head  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

**C.** Full Name (Last, First, Middle Initial)  
Margaret McCarthy  
 Mailing Address PO Box 641  
 City State Zip Code  
 Chatham MA 02633-0641  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 2 2 / 2 0 0 8  
**Transaction ID:** 021908-14  
 Amount of Each Receipt this Period  
 416.66  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Aetna Inc. CIO & Svp, Procurement & Re  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 833.32

**SUBTOTAL** of Receipts This Page (optional) ..... ► 716.66  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 21 / 36  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Frank G. McCauley

Mailing Address 25 Greystone Drive

City State Zip Code  
Canton CT 06019-3715

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

Name of Employer Occupation  
Aetna Inc. Hd, Consumer Business Segment

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 800.00

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

**Transaction ID:** 021908-192

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
Robert M. Mead

Mailing Address 3891 Congress Street

City State Zip Code  
Fairfield CT 06824-2078

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

Name of Employer Occupation  
Aetna Inc. Hd, Strat Mktg & Communication

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 833.32

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

**Transaction ID:** 021908-69

Amount of Each Receipt this Period  
416.66

**C.** Full Name (Last, First, Middle Initial)  
Steven C. Meholic

Mailing Address 38 Anvil Drive

City State Zip Code  
Avon CT 06001-3201

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

Name of Employer Occupation  
Aetna Inc. Head of Pharmacy Benefit Mgmt

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

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

**Transaction ID:** 021908-61

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1066.66**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 36
	<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)  
Aetna Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert K. Mendonsa	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 1757 North Wilmot	<b>Transaction ID:</b> 021908-180
	City State Zip Code Chicago IL 60647-5523	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Aetna Inc. Occupation General Manager, Asm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kay D. Mooney	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 33 Fox Lane	<b>Transaction ID:</b> 021908-160
	City State Zip Code Durham CT 06422-3221	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Aetna Inc. Occupation Head of Med Cost Mgmt/Mentor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Patricia P. Mueller	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 279 Ridings Way	<b>Transaction ID:</b> 021908-196
	City State Zip Code Ambler PA 19002-5248	Amount of Each Receipt this Period 412.50
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Aetna Inc. Occupation Head of Medical Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 825.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>762.50</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 23 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Louise D. Murphy

Mailing Address 397 Forest Lane

City State Zip Code  
Glastonbury CT 06033-3921

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

Name of Employer Occupation  
Aetna Inc. Head of Behavioral Health

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-32

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
John E. Neugebauer

Mailing Address 1411 Knightsbridge Drive

City State Zip Code  
Blue Bell PA 19422-1446

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

Name of Employer Occupation  
Aetna Inc. Dpty Chief Legal Offcr Litigat

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-242

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Franklin C. Norman

Mailing Address 277 Cider Brook Road South

City State Zip Code  
Avon CT 06001-2849

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

Name of Employer Occupation  
Aetna Inc. CIO - Active Health

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 830.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-57

Amount of Each Receipt this Period  
415.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **815.00**

**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 24 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Felicia F. Norwood

Mailing Address 15 West 15th Street

City State Zip Code  
Chicago IL 60605-2723

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

Name of Employer Occupation  
Aetna Inc. President and COO Activehealth

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-195

Amount of Each Receipt this Period  
416.66

**B.**

Full Name (Last, First, Middle Initial)  
Nicole O'Rourke

Mailing Address 55 High Ridge Road

City State Zip Code  
West Hartford CT 06117-1814

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

Name of Employer Occupation  
Aetna Inc. Hd of Advertising & Brand Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-328

Amount of Each Receipt this Period  
130.00

**C.**

Full Name (Last, First, Middle Initial)  
Ronald Olejniczak

Mailing Address 67 High Valley Drive

City State Zip Code  
Canton CT 06019-4521

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

Name of Employer Occupation  
Aetna Inc. Controller

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-209

Amount of Each Receipt this Period  
416.66

**SUBTOTAL** of Receipts This Page (optional) ..... ► **963.32**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 36

(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Susan M. Peters

Mailing Address 32 Gatewood Drive

City State Zip Code  
Avon CT 06001-3949

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

Name of Employer Occupation  
Aetna Inc. Head of Tricare

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 720.00

Date of Receipt

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

Transaction ID: 021908-121

Amount of Each Receipt this Period

360.00

**B.**

Full Name (Last, First, Middle Initial)  
Alfred P. Quirk

Mailing Address 29 Pembroke Hill

City State Zip Code  
Farmington CT 06032-1461

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

Name of Employer Occupation  
Aetna Inc. Hd of Finance and Treasurer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 833.32

Date of Receipt

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

Transaction ID: 021908-119

Amount of Each Receipt this Period

416.66

**C.**

Full Name (Last, First, Middle Initial)  
Lonny Reisman

Mailing Address 7 Black Rock Road

City State Zip Code  
Muttontown NY 11545-3301

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

Name of Employer Occupation  
Aetna Inc. CEO, Active Health

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 833.32

Date of Receipt

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

Transaction ID: 021908-54

Amount of Each Receipt this Period

416.66

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

1193.32

**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 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Ross W. Sanders

Mailing Address 7419 Colgate Avenue

City State Zip Code  
Dallas TX 75225-4508

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

Name of Employer Occupation  
Aetna Inc. National Accounts Regional Hd

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-308

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
John Sheehy

Mailing Address 25 Williamsburg Lane

City State Zip Code  
Unionville CT 06085-1157

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

Name of Employer Occupation  
Aetna Inc. Head Govt & Labor Sector, Na

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-3

Amount of Each Receipt this Period  
325.00

**C.**

Full Name (Last, First, Middle Initial)  
Steven J. Sigal

Mailing Address 192 Krawski Drive

City State Zip Code  
South Windsor CT 06074-3845

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

Name of Employer Occupation  
Aetna Inc. Head of Internal Audit

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-206

Amount of Each Receipt this Period  
185.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **660.00**

**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 27 / 36
	<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)  
Aetna Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul Silva	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 12 Autumn Lane	<b>Transaction ID:</b> 021908-35
	City State Zip Code Reading MA 01867-1805	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Aetna Inc. Product Head	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Christine B. Skelly	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 45 Glenwood Road	<b>Transaction ID:</b> 021908-260
	City State Zip Code West Hartford CT 06107-1506	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Aetna Inc. Segment Head of Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James Starr	Date of Receipt MM / DD / YYYY 02 / 22 / 2008
	Mailing Address 2 Stockbridge Lane	<b>Transaction ID:</b> 021908-55
	City State Zip Code Avon CT 06001-4415	Amount of Each Receipt this Period 415.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Aetna Inc. CFO, National Businesses	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 830.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>840.00</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 28 / 36  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

**A.**

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

Mailing Address 35 Woodhaven Drive

City State Zip Code  
Simsbury CT 06070-2642

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

Name of Employer Occupation  
Aetna Inc. Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 512.50

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-183

Amount of Each Receipt this Period  
256.25

**B.**

Full Name (Last, First, Middle Initial)  
Thomas C. Strohmenger

Mailing Address 20 Norwood Road

City State Zip Code  
West Hartford CT 06117-2233

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

Name of Employer Occupation  
Aetna Inc. Head of Govt Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-88

Amount of Each Receipt this Period  
416.66

**C.**

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

Mailing Address 27382 Silver Creek Drive

City State Zip Code  
San Juan Capistran CA 92675-1524

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

Name of Employer Occupation  
Aetna Inc. Region Head of Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-302

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **822.91**

**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 / 36  
(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)  
Aetna Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Leslie A. Taylor

Mailing Address 1933 Haddon Street

City State Zip Code  
Houston TX 77019-5762

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

Name of Employer Occupation  
Aetna Inc. Strategic Business Dev Hd

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-75

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)  
Curtis Terry

Mailing Address 4165 Arbolado Drive

City State Zip Code  
Walnut Creek CA 94598-4672

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

Name of Employer Occupation  
Aetna Inc. Region Head, Health Care Deliv

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-280

Amount of Each Receipt this Period  
300.00

**C.**

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

Mailing Address 1080 Parkerville Road

City State Zip Code  
West Chester PA 19382-7037

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

Name of Employer Occupation  
Aetna Inc. General Manager Retiree Mkts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 333.34

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

Transaction ID: 021908-276

Amount of Each Receipt this Period  
166.67

**SUBTOTAL** of Receipts This Page (optional) ..... ► **666.67**

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

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

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

FOR LINE NUMBER: PAGE 30 / 36  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Vincent P. Vallario

Mailing Address 240 Lexington Road

City State Zip Code  
Glastonbury CT 06033-4342

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

Name of Employer Occupation  
Aetna Inc. HR Business Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-201

Amount of Each Receipt this Period  
125.00

**B.** Full Name (Last, First, Middle Initial)  
John J. Webb

Mailing Address 1090 Bay Pointe Crossing

City State Zip Code  
Alpharetta GA 30005-6955

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

Name of Employer Occupation  
Aetna Inc. Hd of Govt Sgmt/ Bus Alliances

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-278

Amount of Each Receipt this Period  
416.66

**C.** Full Name (Last, First, Middle Initial)  
Elease E. Wright

Mailing Address 205 Girard Avenue

City State Zip Code  
Hartford CT 06105-2234

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

Name of Employer Occupation  
Aetna Inc. Head of Ahr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-108

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **941.66**

**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 / 36  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Patrick R. Young

Mailing Address 2926 Comfort Road

City State Zip Code  
New Hope PA 18938-5620

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

Name of Employer Occupation  
Aetna Inc. General Manager, Asm

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-225

Amount of Each Receipt this Period  
125.00

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

Mailing Address 51 Back Land Road

City State Zip Code  
South Glastonbury CT 06073-3127

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

Name of Employer Occupation  
Aetna Inc. Chief Privacy Officer

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-134

Amount of Each Receipt this Period  
200.00

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

Mailing Address 357 River Road

City State Zip Code  
Deep River CT 06417-2121

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

Name of Employer Occupation  
Aetna Inc. EVP, Chief Financial Officer

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** 021908-71

Amount of Each Receipt this Period  
416.66

**SUBTOTAL** of Receipts This Page (optional) ..... ► 741.66

**TOTAL** This Period (last page this line number only) ..... ► 21328.80

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Castle Campaign Fund <hr/> Mailing Address PO Box 133 <hr/> City Wilmington State DE Zip Code 19899 <hr/> Purpose of Disbursement Contribution Candidate Name Michael Castle Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District: 01	Transaction ID: 26956-0138055682182 Date of Disbursement 02 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> Category/Type 011
<b>B.</b>	Full Name (Last, First, Middle Initial) Continuing a Majority Party Action Committee (CAMPAC) <hr/> Mailing Address 5915 Eastman Avenue Suite 100 <hr/> City Midland State MI Zip Code 48640 <hr/> Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	Transaction ID: 34337-3457757830619 Date of Disbursement 02 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 5000.00 <hr/> Category/Type 011
<b>C.</b>	Full Name (Last, First, Middle Initial) Dave Camp for Congress 2008 <hr/> Mailing Address 5915 Eastman Ave. Suite 100 5915 Eastman Ave. Suite 100 <hr/> City Midland State MI Zip Code 48640 <hr/> Purpose of Disbursement Contribution Candidate Name Dave Camp Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 04	Transaction ID: 01044-8062097430229 Date of Disbursement 02 / 12 / 2008 <hr/> Amount of Each Disbursement this Period 2500.00 <hr/> Category/Type 011

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

8500.00

**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 33 / 36

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

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC)</p> <p>Mailing Address 25 East Main Street Suite 200</p> <p>City Richmond State VA Zip Code 23219</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>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) ▼</p>	<p><b>Transaction ID:</b> 28157-4322473406791 <b>Date of Disbursement</b> 02 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) John Kerry for Senate</p> <p>Mailing Address 10 G Street NE Suite 710</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution Candidate Name John Kerry</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 28157-4204217791557 <b>Date of Disbursement</b> 02 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 3500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John Kerry for Senate</p> <p>Mailing Address 10 G Street NE Suite 710</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution Candidate Name John Kerry</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 28157-9938470721244 <b>Date of Disbursement</b> 02 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>

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

7500.00

**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 34 / 36

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

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Moderate Democrats Pac	Transaction ID: 01044-6283532977104
	Mailing Address 426 C Street NE	Date of Disbursement MM / DD / YYYY 02 / 12 / 2008
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	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) ▼	Contribution

B.	Full Name (Last, First, Middle Initial) NATIONAL LEADERSHIP PAC	Transaction ID: 83858-0588647723197
	Mailing Address PO Box 5577 Manhattenville Station	Date of Disbursement MM / DD / YYYY 02 / 08 / 2008
	City New York State NY Zip Code 10027	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	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) ▼	Contribution

C.	Full Name (Last, First, Middle Initial) Pat Roberts for Senate	Transaction ID: 28157-7713739275932
	Mailing Address PO Box 433	Date of Disbursement MM / DD / YYYY 02 / 21 / 2008
	City Great Bend State KS Zip Code 67530	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Pat Roberts	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) People for English	Transaction ID: 28157-3138696551322
	Mailing Address PO Box 1940	Date of Disbursement MM / DD / YYYY 02 / 21 / 2008
	City Erie State PA Zip Code 16507	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Phil English	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Stivers for Congress	Transaction ID: 83858-9898340106010
	Mailing Address 81 S Fifth Street	Date of Disbursement MM / DD / YYYY 02 / 08 / 2008
	City Columbus State OH Zip Code 43215	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Steve Stivers	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Wyden for Senate	Transaction ID: 28157-7429315447807
	Mailing Address 232 NE 9th Avenue	Date of Disbursement MM / DD / YYYY 02 / 21 / 2008
	City Portland State OR Zip Code 97232	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name Ron Wyden	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	29000.00

Image# 28990698092

Form/Schedule: **F3X**

Transaction ID:

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