

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

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

FOR LINE NUMBER: PAGE 101 OF 1239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Boxer, Mark, L, ,

Mailing Address 900 Cottage Grove Rd

City  
BloomfieldState  
CTZip Code  
06002-2920FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CT GENERAL LIFE INSURANCE COOccupation (for Individual)  
EVP CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 27 / 2019

Transaction ID : 2019062572110-7426

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brannen, Jason, M, ,

Mailing Address 7555 Goodwin Rd

City  
ChattanoogaState  
TNZip Code  
37421-3183FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CT GENERAL LIFE INSURANCE COOccupation (for Individual)  
Quality Review and Audit Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2019

Transaction ID : 201903057218-8648

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brannen, Jason, M, ,

Mailing Address 7555 Goodwin Rd

City  
ChattanoogaState  
TNZip Code  
37421-3183FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CT GENERAL LIFE INSURANCE COOccupation (for Individual)  
Quality Review and Audit Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2019

Transaction ID : 201903197219-8643

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

292.00