

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

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

FOR LINE NUMBER: PAGE 1027 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. Staples, David, J, ,

Mailing Address 530 Great Circle Rd

City
NashvilleState
TNZip Code
37228-1309FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cigna Corp

Occupation (for Individual)

Customer Service Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : 2019062572110-26918

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Stapleton, Kenneth, , ,

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 CO

Occupation (for Individual)

VP Talent Acquisition

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : 201905287219-8204

Amount of Each Receipt this Period

19.25

☐ Memo Item

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

C. Stapleton, Kenneth, , ,

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 CO

Occupation (for Individual)

VP Talent Acquisition

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2019

Transaction ID : 201906129139-8164

Amount of Each Receipt this Period

19.25

☐ Memo Item

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

88.50

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