

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

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

FOR LINE NUMBER: PAGE 113 OF 125

(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

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

A. Wankum, Teresa, , ,

Mailing Address 400 Appian Way

City  
DoylestownState  
PAZip Code  
18901-2046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP Clin Svcs &amp; Plat Sol

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2019

Transaction ID : 2019032615497-620

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Warrington, Justin, J, ,

Mailing Address 25 Longwood Dr

City  
StratfordState  
NJZip Code  
08084-1917FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, CFO Commercial Bus

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 01 / 25 / 2019

Transaction ID : 2019012814137-619

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Warrington, Justin, J, ,

Mailing Address 25 Longwood Dr

City  
StratfordState  
NJZip Code  
08084-1917FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, CFO Commercial Bus

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2019

Transaction ID : 201902269136-640

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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