

**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)

20 F Street, N.W.

Suite 350

☐Check if different
than previously
reported. (ACC)

Washington

DC

20001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

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 (12S)

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

1 1

2 3

2 0 1 0

through

1 2

3 1

2 0 1 0

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 M. Topodas

Signature of Treasurer

Electronically Filed by Mr. Jonathan M. Topodas

Date

0 3

1 4

2 0 1 1

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)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 281

Write or Type Committee Name
Aetna Inc. Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	364336.87
(b) Cash on Hand at Beginning of Reporting Period	169230.43	
(c) Total Receipts (from Line 19)	79852.75	476734.29
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	249083.18	841071.16
7. Total Disbursements (from Line 31)	5409.00	597396.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	243674.18	243674.18
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY 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

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Aetna Inc. Political Action Committee

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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		
(i) Itemized (use Schedule A)	75475.50	363534.05
(ii) Unitemized	4377.25	98200.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)	79852.75	461734.29
(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)	79852.75	461734.29
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	15000.00
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))	79852.75	476734.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	79852.75	476734.29

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

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.....	109.00	223.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	109.00	223.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7300.00	470300.00	
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	125.00	
(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	125.00	
29. Other Disbursements.....	-2000.00	126748.98	
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))..	5409.00	597396.98	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5409.00	597396.98	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	79852.75	461734.29
34. Total Contribution Refunds (from Line 28(d))	0.00	125.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	79852.75	461609.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	109.00	223.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	109.00	223.00

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

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

FOR LINE NUMBER: PAGE 7 / 281

(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)

Michelle Abbosh

Mailing Address 309 N Shipwreck Ave

City

Ponte Vedra

State

FL

Zip Code

32081-5003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-469

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Michelle Abbosh

Mailing Address 309 N Shipwreck Ave

City

Ponte Vedra

State

FL

Zip Code

32081-5003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-467

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mary Kathryn Abel

Mailing Address 816 N Carolina Ave SE

City

Washington

State

DC

Zip Code

20003-1361

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Financial Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.33

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-134

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)

133.33

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 8 / 281

(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)

Dana S. Abetti

Mailing Address 4 Round Hill Rd

City

Salem

State

CT

Zip Code

06420-3850

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Strategic Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3125.00

Date of Receipt

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

Transaction ID: 112010-359

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

Dana S. Abetti

Mailing Address 4 Round Hill Rd

City

Salem

State

CT

Zip Code

06420-3850

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Strategic Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3125.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-358

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

Michele Abrams

Mailing Address 3251 Stonewood Dr

City

Lansing

State

MI

Zip Code

48912-5027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-118

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

575.00

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 9 / 281

(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)

Michele Abrams

Mailing Address 3251 Stonewood Dr

City

Lansing

State

MI

Zip Code

48912-5027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-118

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Caroline V. Aigner

Mailing Address 794 Halteman Rd

City

Souderton

State

PA

Zip Code

18964-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Engineer Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-478

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Caroline V. Aigner

Mailing Address 794 Halteman Rd

City

Souderton

State

PA

Zip Code

18964-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Engineer Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-476

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: PAGE 10 / 281

(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)

Kenneth A. Akinwande

Mailing Address 2631 Sir Castor Ct

City

Lewisville

State

TX

Zip Code

75056-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-387

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Kenneth A. Akinwande

Mailing Address 2631 Sir Castor Ct

City

Lewisville

State

TX

Zip Code

75056-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-386

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

William T. Aleman

Mailing Address 105 Emily Way

City

West Hartford

State

CT

Zip Code

06107-3154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Underwriting Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-216

Amount of Each Receipt this Period

100.00

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 11 / 281

(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)

William T. Aleman

Mailing Address 105 Emily Way

City

West Hartford

State

CT

Zip Code

06107-3154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Underwriting Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-215

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Douglas S. Allen

Mailing Address 91 W Wynd Ter

City

Middletown

State

CT

Zip Code

06457-8729

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Integration Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-606

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Douglas S. Allen

Mailing Address 91 W Wynd Ter

City

Middletown

State

CT

Zip Code

06457-8729

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Integration Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-604

Amount of Each Receipt this Period

50.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 281

(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)

Daniel Aloï

Mailing Address 3 Winthrop Blvd

City

Cromwell

State

CT

Zip Code

06416-1260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Mgr. Bus Cont. Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-598

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Daniel Aloï

Mailing Address 3 Winthrop Blvd

City

Cromwell

State

CT

Zip Code

06416-1260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Mgr. Bus Cont. Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-596

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Beth E. Andersen

Mailing Address 3330 Vaughn Rd

City

Lafayette

State

CA

Zip Code

94549-1950

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head West

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: 112010-256

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 13 / 281

(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)

Beth E. Andersen

Mailing Address 3330 Vaughn Rd

City

Lafayette

State

CA

Zip Code

94549-1950

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head West

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-255

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Kirsten Anderson

Mailing Address 80 Cesca Ln

City

Durham

State

CT

Zip Code

06422-1639

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief of Staff, CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-144

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Kirsten Anderson

Mailing Address 80 Cesca Ln

City

Durham

State

CT

Zip Code

06422-1639

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief of Staff, CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-145

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 14 / 281

(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)

Mary V. Anderson

Mailing Address 386 Richardson Way

City

Mill Valley

State

CA

Zip Code

94941-4053

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-420

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mary V. Anderson

Mailing Address 386 Richardson Way

City

Mill Valley

State

CA

Zip Code

94941-4053

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-418

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Raymond J. Arroyo

Mailing Address 14 Michelle Ln

City

Avon

State

CT

Zip Code

06001-3267

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Head of Diversity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1733.33

Date of Receipt

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

Transaction ID: 112010-73

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 / 281

(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)

Raymond J. Arroyo

Mailing Address 14 Michelle Ln

City

Avon

State

CT

Zip Code

06001-3267

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Diversity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1733.33

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-73

Amount of Each Receipt this Period

83.33

B.

Full Name (Last, First, Middle Initial)

Peter S. Atwood

Mailing Address 22 Cowles Rd

City

Bethlehem

State

CT

Zip Code

06751-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of AIMG Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-322

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Peter S. Atwood

Mailing Address 22 Cowles Rd

City

Bethlehem

State

CT

Zip Code

06751-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of AIMG Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-321

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

283.33

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 / 281

(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)

Debra Jean Bacon

Mailing Address 7241 E Rustling Pass

City

Scottsdale

State

AZ

Zip Code

85255-4743

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-187

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Craig D. Badger

Mailing Address 2108 Emily Cir

City

Warrington

State

PA

Zip Code

18976-1572

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Application Development Mgr II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-522

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Craig D. Badger

Mailing Address 2108 Emily Cir

City

Warrington

State

PA

Zip Code

18976-1572

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Application Development Mgr II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-520

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

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 / 281

(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)

Sherry R. Baker

Mailing Address 18802 Wimbledon Cir

City

Lutz

State

FL

Zip Code

33558-5300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-369

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Sherry R. Baker

Mailing Address 18802 Wimbledon Cir

City

Lutz

State

FL

Zip Code

33558-5300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-368

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Laura G. Balencia

Mailing Address 2405 County Road 321

City

La Vernia

State

TX

Zip Code

78121-5630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Health Care QM Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-568

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 18 / 281

(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)

Laura G. Balencia

Mailing Address 2405 County Road 321

City

La Vernia

State

TX

Zip Code

78121-5630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Health Care QM Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-566

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Helen Baratta

Mailing Address 229 Waterford Dr

City

Mc Kees Rocks

State

PA

Zip Code

15136-1375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Customer Service Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-428

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Helen Baratta

Mailing Address 229 Waterford Dr

City

Mc Kees Rocks

State

PA

Zip Code

15136-1375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Customer Service Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-426

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: PAGE 19 / 281

(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)

Philip M. Barbaro

Mailing Address 80 Pheasant Dr

City

Middletown

State

CT

Zip Code

06457-5172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Senior Sales Executive

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-31

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Philip M. Barbaro

Mailing Address 80 Pheasant Dr

City

Middletown

State

CT

Zip Code

06457-5172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Senior Sales Executive

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-31

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Valerie A. Bard

Mailing Address 373 Williams Rd

City

Wynnewood

State

PA

Zip Code

19096-1636

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-468

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 20 / 281

(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)

Valerie A. Bard

Mailing Address 373 Williams Rd

City

Wynnewood

State

PA

Zip Code

19096-1636

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-466

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Dianne L. Barnes

Mailing Address 233 Old Maids Ln

City

South Glastonbury

State

CT

Zip Code

06073-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Claim Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-577

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Dianne L. Barnes

Mailing Address 233 Old Maids Ln

City

South Glastonbury

State

CT

Zip Code

06073-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Claim Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-575

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 21 / 281

(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)

Gregory Keith Barnes

Mailing Address 4917 W 147th St

City

Leawood

State

KS

Zip Code

66224-3768

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-566

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Gregory Keith Barnes

Mailing Address 4917 W 147th St

City

Leawood

State

KS

Zip Code

66224-3768

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-564

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

William C. Baskin

Mailing Address 57 Hunter Ln

City

Glastonbury

State

CT

Zip Code

06033-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-496

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 22 / 281

(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)

William C. Baskin

Mailing Address 57 Hunter Ln

City

Glastonbury

State

CT

Zip Code

06033-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-494

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Cynthia J. Bates

Mailing Address 124 Coldspring Xing

City

South Glastonbury

State

CT

Zip Code

06073-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: 112010-349

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Cynthia J. Bates

Mailing Address 124 Coldspring Xing

City

South Glastonbury

State

CT

Zip Code

06073-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-348

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

134.00

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 / 281

(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)

Katharine Noel Begley

Mailing Address 2042 General Alexander Dr

City

Malvern

State

PA

Zip Code

19355-9799

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Grp Ins, Dntl & Vis Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

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

Transaction ID: 112010-449

Amount of Each Receipt this Period

85.00

B.

Full Name (Last, First, Middle Initial)

Katharine Noel Begley

Mailing Address 2042 General Alexander Dr

City

Malvern

State

PA

Zip Code

19355-9799

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Grp Ins, Dntl & Vis Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-447

Amount of Each Receipt this Period

85.00

C.

Full Name (Last, First, Middle Initial)

Mark S. Belongie

Mailing Address 10830 Grenadier Ln

City

Alpharetta

State

GA

Zip Code

30022-4724

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-196

Amount of Each Receipt this Period

50.00

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 24 / 281

(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)

Mark S. Belongie

Mailing Address 10830 Grenadier Ln

City

Alpharetta

State

GA

Zip Code

30022-4724

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-196

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Patricia Bennett

Mailing Address 42 Reussner Rd

City

Southington

State

CT

Zip Code

06489-3310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1087.50

Date of Receipt

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

Transaction ID: 112010-60

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Patricia Bennett

Mailing Address 42 Reussner Rd

City

Southington

State

CT

Zip Code

06489-3310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1087.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-60

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 25 / 281

(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)

William Berenson

Mailing Address 2427 W Huron St

City

Chicago

State

IL

Zip Code

60612-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head MA

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: 112010-417

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

William Berenson

Mailing Address 2427 W Huron St

City

Chicago

State

IL

Zip Code

60612-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head MA

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-415

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

David B. Berg

Mailing Address 23 Bucks Xing

City

Rocky Hill

State

CT

Zip Code

06067-2836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Segment Head of Underwriting

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-234

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 / 281

(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)

David B. Berg

Mailing Address 23 Bucks Xing

City

Rocky Hill

State

CT

Zip Code

06067-2836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Segment Head of Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-233

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Fred Bergstrom

Mailing Address 70 Dunham Dr

City

Berlin

State

CT

Zip Code

06037-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Ntwrk Distributed Support Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-298

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Fred Bergstrom

Mailing Address 70 Dunham Dr

City

Berlin

State

CT

Zip Code

06037-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Ntwrk Distributed Support Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-297

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 27 / 281

(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)

John J. Bermel

Mailing Address 237 Old Farms Rd

City

Simsbury

State

CT

Zip Code

06070-1533

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

CFO, Business Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-443

Amount of Each Receipt this Period

416.66

B.

Full Name (Last, First, Middle Initial)

John J. Bermel

Mailing Address 237 Old Farms Rd

City

Simsbury

State

CT

Zip Code

06070-1533

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

CFO, Business Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-441

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Jeffrey Bernhard

Mailing Address 4615 Collington Ct

City

Missouri City

State

TX

Zip Code

77459-5082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Hd Public & Labor-West

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-472

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

858.32

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 28 / 281

(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)

Jeffrey Bernhard

Mailing Address 4615 Collington Ct

City

Missouri City

State

TX

Zip Code

77459-5082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Hd Public & Labor-West

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-470

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Clifford L. Berryman

Mailing Address 3604 Ravens Crest Dr

City

Plainsboro

State

NJ

Zip Code

08536-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr / Lead Informatics Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-544

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Clifford L. Berryman

Mailing Address 3604 Ravens Crest Dr

City

Plainsboro

State

NJ

Zip Code

08536-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr / Lead Informatics Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-542

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: PAGE 29 / 281

(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)

Mark Bertolini

Mailing Address 14 W Hill Dr

City

West Hartford

State

CT

Zip Code

06119-1347

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

CEO & President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-513

Amount of Each Receipt this Period

416.66

B.

Full Name (Last, First, Middle Initial)

Mark Bertolini

Mailing Address 14 W Hill Dr

City

West Hartford

State

CT

Zip Code

06119-1347

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

CEO & President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-511

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Jerry Berwick

Mailing Address 4401 Roseland St

City

Houston

State

TX

Zip Code

77006-5925

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-433

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

858.32

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 30 / 281

(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)

Jerry Berwick

Mailing Address 4401 Roseland St

City

Houston

State

TX

Zip Code

77006-5925

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-431

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Nitin Bhargava

Mailing Address 440 Prairie Knoll Dr

City

Naperville

State

IL

Zip Code

60565-4155

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Medicare MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-488

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Nitin Bhargava

Mailing Address 440 Prairie Knoll Dr

City

Naperville

State

IL

Zip Code

60565-4155

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Medicare MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-486

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: PAGE 31 / 281

(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)

Louise E. Bishop

Mailing Address 21614 Canyon Forest Ct

City

State

Zip Code

Katy

TX

77450-5659

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Direct/Database Marketing Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-425

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Louise E. Bishop

Mailing Address 21614 Canyon Forest Ct

City

State

Zip Code

Katy

TX

77450-5659

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Direct/Database Marketing Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-423

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Joseph C. Black

Mailing Address 18 High Farm Rd

City

State

Zip Code

East Granby

CT

06026-8703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Corporate Purchasing Head

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 112010-311

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 32 / 281

(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)

Joseph C. Black

Mailing Address 18 High Farm Rd

City

East Granby

State

CT

Zip Code

06026-8703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Corporate Purchasing Head

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-310

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Jonathan Bosta

Mailing Address 131 Quigley Rd

City

Wallingford

State

CT

Zip Code

06492-5320

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Tech Infrastructure Spec, Snr

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-50

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Jonathan Bosta

Mailing Address 131 Quigley Rd

City

Wallingford

State

CT

Zip Code

06492-5320

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Tech Infrastructure Spec, Snr

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-50

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 33 / 281

(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)

Elizabeth Bougere

Mailing Address 140 Forge Dr

City

Avon

State

CT

Zip Code

06001-3255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Leadership Development Cnslt

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-221

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Elizabeth Bougere

Mailing Address 140 Forge Dr

City

Avon

State

CT

Zip Code

06001-3255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Leadership Development Cnslt

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-220

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Sandra Brickey

Mailing Address 2612 White Rose Dr

City

Loganville

State

GA

Zip Code

30052-2196

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.96

Date of Receipt

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

Transaction ID: 112010-247

Amount of Each Receipt this Period

88.33

SUBTOTAL of Receipts This Page (optional)

138.33

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 34 / 281

(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)

Sandra Brickey

Mailing Address 2612 White Rose Dr

City

Loganville

State

GA

Zip Code

30052-2196

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.96

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-246

Amount of Each Receipt this Period

88.33

B.

Full Name (Last, First, Middle Initial)

Elizabeth Sponenbergh Brickman

Mailing Address 751 Charnwood Dr

City

Wyckoff

State

NJ

Zip Code

07481-1011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.33

Date of Receipt

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

Transaction ID: 112010-140

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Elizabeth Sponenbergh Brickman

Mailing Address 751 Charnwood Dr

City

Wyckoff

State

NJ

Zip Code

07481-1011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.33

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-141

Amount of Each Receipt this Period

8.33

SUBTOTAL of Receipts This Page (optional)

121.66

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 35 / 281

(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)

Erin Brisco

Mailing Address 9523 NW 33rd Pl

City

Sunrise

State

FL

Zip Code

33351-7164

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Grp Insurance Operations Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-519

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Erin Brisco

Mailing Address 9523 NW 33rd Pl

City

Sunrise

State

FL

Zip Code

33351-7164

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Grp Insurance Operations Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-517

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Paul J. Brown

Mailing Address 499 Blackstone Ct

City

Danville

State

CA

Zip Code

94506-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-129

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: PAGE 36 / 281

(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 J. Brown

Mailing Address 499 Blackstone Ct

City

Danville

State

CA

Zip Code

94506-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Senior Sales Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-129

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Richard S. Brown

Mailing Address 48 Pine Glen Rd

City

Simsbury

State

CT

Zip Code

06070-2751

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Financial Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.83

Date of Receipt

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

Transaction ID: 112010-148

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Richard S. Brown

Mailing Address 48 Pine Glen Rd

City

Simsbury

State

CT

Zip Code

06070-2751

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Financial Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.83

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-149

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)

65.83

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 / 281

(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)

Laurie Brubaker

Mailing Address 1418 Danbury Dr

City

Mansfield

State

TX

Zip Code

76063-3845

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Pharmacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4050.00

Date of Receipt

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

Transaction ID: 112010-451

Amount of Each Receipt this Period

337.50

B.

Full Name (Last, First, Middle Initial)

Laurie Brubaker

Mailing Address 1418 Danbury Dr

City

Mansfield

State

TX

Zip Code

76063-3845

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Pharmacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4050.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-449

Amount of Each Receipt this Period

337.50

C.

Full Name (Last, First, Middle Initial)

Ann L. Bryan

Mailing Address 1 Buttonwood Hill Rd

City

Collinsville

State

CT

Zip Code

06019-3526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

AARP Program Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-230

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

725.00

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 38 / 281

(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)

Ann L. Bryan

Mailing Address 1 Buttonwood Hill Rd

City

Collinsville

State

CT

Zip Code

06019-3526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

AARP Program Head

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-229

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Sheryl A. Burke

Mailing Address 53 Chatham Hill Rd

City

South Glastonbury

State

CT

Zip Code

06073-3543

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, National Care Management

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: 112010-274

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Sheryl A. Burke

Mailing Address 53 Chatham Hill Rd

City

South Glastonbury

State

CT

Zip Code

06073-3543

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, National Care Management

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-273

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

450.00

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 39 / 281

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☒ 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)

David H. Burton

Mailing Address 13 Lorraine Pl

City

Summit

State

NJ

Zip Code

07901-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Senior Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-565

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

David H. Burton

Mailing Address 13 Lorraine Pl

City

Summit

State

NJ

Zip Code

07901-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Senior Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-563

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Lisa G. Burt

Mailing Address 83R Banta Ln

City

Durham

State

CT

Zip Code

06422-3300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Dept Head Production Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-259

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 40 / 281

(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)

Lisa G. Burt

Mailing Address 83R Banta Ln

City

Durham

State

CT

Zip Code

06422-3300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Dept Head Production Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-258

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Elena E. Butkus

Mailing Address 341 S Spring Ave

City

La Grange

State

IL

Zip Code

60525-6207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-18

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Elena E. Butkus

Mailing Address 341 S Spring Ave

City

La Grange

State

IL

Zip Code

60525-6207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-18

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 41 / 281

(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)

Christopher Campbell

Mailing Address 130 Jerry Daniels Rd

City

Marlborough

State

CT

Zip Code

06447-1230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-24

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Christopher Campbell

Mailing Address 130 Jerry Daniels Rd

City

Marlborough

State

CT

Zip Code

06447-1230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-24

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Kathleen M. Campbell

Mailing Address 112 Burgundy Dr

City

Kensington

State

CT

Zip Code

06037-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Development Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-236

Amount of Each Receipt this Period

25.00

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 42 / 281

(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)

Kathleen M. Campbell

Mailing Address 112 Burgundy Dr

City

Kensington

State

CT

Zip Code

06037-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Development Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-235

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mary E. Cardin

Mailing Address 56 Balsam Landing Road

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, M & A Integration, Pharm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.79

Date of Receipt

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

Transaction ID: 112010-363

Amount of Each Receipt this Period

83.33

C.

Full Name (Last, First, Middle Initial)

Mary E. Cardin

Mailing Address 56 Balsam Landing Road

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, M & A Integration, Pharm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.79

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-362

Amount of Each Receipt this Period

104.16

SUBTOTAL of Receipts This Page (optional)

212.49

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 43 / 281

(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)

Peter Carpenter

Mailing Address 72 Bishop Ln

City

Madison

State

CT

Zip Code

06443-3338

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

New Produ & Strat Plng Cons

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-396

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Peter Carpenter

Mailing Address 72 Bishop Ln

City

Madison

State

CT

Zip Code

06443-3338

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

New Produ & Strat Plng Cons

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-395

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Donn S. Carsia

Mailing Address 231 Hopewell Dr

City

Allentown

State

PA

Zip Code

18104-9596

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Distributed Support Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-430

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

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 44 / 281

(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)

Donn S. Carsia

Mailing Address 231 Hopewell Dr

City

Allentown

State

PA

Zip Code

18104-9596

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Distributed Support Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-428

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

William J. Casazza

Mailing Address 229 Cold Spring Rd

City

Avon

State

CT

Zip Code

06001-4014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-394

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

William J. Casazza

Mailing Address 229 Cold Spring Rd

City

Avon

State

CT

Zip Code

06001-4014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-393

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)

853.32

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 45 / 281

(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)

Judith Chamberlain

Mailing Address 10 Sea Grass Farm Rd

City

Brunswick

State

ME

Zip Code

04011-7841

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-215

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Judith Chamberlain

Mailing Address 10 Sea Grass Farm Rd

City

Brunswick

State

ME

Zip Code

04011-7841

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-214

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Malissa M. Chavarria

Mailing Address 1502 W Hollywood St

City

Tampa

State

FL

Zip Code

33604-3843

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: 112010-386

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

190.00

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 46 / 281

(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)

Malissa M. Chavarria

Mailing Address 1502 W Hollywood St

City

Tampa

State

FL

Zip Code

33604-3843

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-385

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Donna E. Checkett

Mailing Address 107 E Ridgeley Rd

City

Columbia

State

MO

Zip Code

65203-3529

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of State Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

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

Transaction ID: 112010-189

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Donna E. Checkett

Mailing Address 107 E Ridgeley Rd

City

Columbia

State

MO

Zip Code

65203-3529

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of State Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-189

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

640.00

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 47 / 281

(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)

Michael Ciarrocchi

Mailing Address 70 Country Ln

City

Hebron

State

CT

Zip Code

06248-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Ntwrk Acc & Hlth Pln Svcs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-590

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Michael Ciarrocchi

Mailing Address 70 Country Ln

City

Hebron

State

CT

Zip Code

06248-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Ntwrk Acc & Hlth Pln Svcs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-588

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Willie Frank Cobbin

Mailing Address 4430 Glen Kernan Pkwy E

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 ▼

4875.00

Date of Receipt

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

Transaction ID: 112010-556

Amount of Each Receipt this Period

406.25

SUBTOTAL of Receipts This Page (optional)

456.25

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 48 / 281

(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)

Willie Frank Cobbin

Mailing Address 4430 Glen Kernan Pkwy E

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 ▼

4875.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-554

Amount of Each Receipt this Period

406.25

B.

Full Name (Last, First, Middle Initial)

Douglas B. Cole

Mailing Address 105 Quail Run

City

Glastonbury

State

CT

Zip Code

06033-2738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-368

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Douglas B. Cole

Mailing Address 105 Quail Run

City

Glastonbury

State

CT

Zip Code

06033-2738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-367

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

506.25

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 49 / 281

(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)

Jerome Coller

Mailing Address 3503 Northridge Dr

City

Baltimore

State

MD

Zip Code

21208-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3570.00

Date of Receipt

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

Transaction ID: 112010-190

Amount of Each Receipt this Period

297.50

B.

Full Name (Last, First, Middle Initial)

Jerome Coller

Mailing Address 3503 Northridge Dr

City

Baltimore

State

MD

Zip Code

21208-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3570.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-190

Amount of Each Receipt this Period

297.50

C.

Full Name (Last, First, Middle Initial)

Ruby L. Collins

Mailing Address 4097 John P Green Pl

City

Cleveland

State

OH

Zip Code

44105-5476

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-439

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

620.00

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 50 / 281

(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)

Ruby L. Collins

Mailing Address 4097 John P Green Pl

City

Cleveland

State

OH

Zip Code

44105-5476

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-437

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Gerald J. W. Connor

Mailing Address 8249 Forest Hills Blvd

City

Dallas

State

TX

Zip Code

75218-4410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-593

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Gerald J. W. Connor

Mailing Address 8249 Forest Hills Blvd

City

Dallas

State

TX

Zip Code

75218-4410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-591

Amount of Each Receipt this Period

50.00

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 51 / 281

(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)

Julie V. Conway

Mailing Address 1516 Asylum Ave

City

West Hartford

State

CT

Zip Code

06117-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-133

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Julie V. Conway

Mailing Address 1516 Asylum Ave

City

West Hartford

State

CT

Zip Code

06117-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-133

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Leslee A. Cook

Mailing Address 36 Princeton Ln

City

Glastonbury

State

CT

Zip Code

06033-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-180

Amount of Each Receipt this Period

25.00

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 52 / 281

(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)

Leslee A. Cook

Mailing Address 36 Princeton Ln

City

Glastonbury

State

CT

Zip Code

06033-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-180

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Linda S. Cooper

Mailing Address 16566 N 109th PI

City

Scottsdale

State

AZ

Zip Code

85255-9093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-526

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Linda S. Cooper

Mailing Address 16566 N 109th PI

City

Scottsdale

State

AZ

Zip Code

85255-9093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-524

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 53 / 281

(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)

Stanley Coplan

Mailing Address 3 Rose Ter

City

Lafayette Hill

State

PA

Zip Code

19444-1635

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

User Experience Designer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-195

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Stanley Coplan

Mailing Address 3 Rose Ter

City

Lafayette Hill

State

PA

Zip Code

19444-1635

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

User Experience Designer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-195

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

David J. Corkum

Mailing Address 194 Niantic River Rd

City

Waterford

State

CT

Zip Code

06385-1847

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

Grp Managing Dir, Aetna Int'l

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-262

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 54 / 281

(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)

David J. Corkum

Mailing Address 194 Niantic River Rd

City

Waterford

State

CT

Zip Code

06385-1847

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Grp Managing Dir, Aetna Int'l

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-261

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Eric D. Cormier

Mailing Address 6 Copper Beech Ln

City

Farmington

State

CT

Zip Code

06032-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Medicare Revenue Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.04

Date of Receipt

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

Transaction ID: 112010-354

Amount of Each Receipt this Period

166.67

C.

Full Name (Last, First, Middle Initial)

Eric D. Cormier

Mailing Address 6 Copper Beech Ln

City

Farmington

State

CT

Zip Code

06032-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Medicare Revenue Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.04

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-353

Amount of Each Receipt this Period

166.67

SUBTOTAL of Receipts This Page (optional)

383.34

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 55 / 281

(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)

Duane A. Cote

Mailing Address 3610 Reagan St

City

Dallas

State

TX

Zip Code

75219-4336

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-415

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Duane A. Cote

Mailing Address 3610 Reagan St

City

Dallas

State

TX

Zip Code

75219-4336

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-413

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Matthias C. Cowley

Mailing Address 1403 E Rock Wren Rd

City

Phoenix

State

AZ

Zip Code

85048-6209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicare Products-MCP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: 112010-214

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

90.00

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 56 / 281

(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)

Matthias C. Cowley

Mailing Address 1403 E Rock Wren Rd

City

Phoenix

State

AZ

Zip Code

85048-6209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicare Products-MCP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-213

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Rodger A. Coyne

Mailing Address 5 Highview Rd

City

Simsbury

State

CT

Zip Code

06070-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: 112010-37

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Rodger A. Coyne

Mailing Address 5 Highview Rd

City

Simsbury

State

CT

Zip Code

06070-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-37

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

440.00

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 57 / 281

(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)

James T. Craig

Mailing Address 405 Meadowbrook Ln

City

Glenside

State

PA

Zip Code

19038-8224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-114

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

James T. Craig

Mailing Address 405 Meadowbrook Ln

City

Glenside

State

PA

Zip Code

19038-8224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-114

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

M. James Crowley

Mailing Address 16 Grass Bonnet Ln

City

Wethersfield

State

CT

Zip Code

06109-2727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Cash Comp & Incentives

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-310

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 58 / 281

(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)

M. James Crowley

Mailing Address 16 Grass Bonnet Ln

City

Wethersfield

State

CT

Zip Code

06109-2727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Cash Comp & Incentives

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-309

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mary Clare Cullen

Mailing Address 3431 Green Fields Dr

City

Sugar Land

State

TX

Zip Code

77479-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-572

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mary Clare Cullen

Mailing Address 3431 Green Fields Dr

City

Sugar Land

State

TX

Zip Code

77479-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-570

Amount of Each Receipt this Period

25.00

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 59 / 281

(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)

Gary A. Culp

Mailing Address 7911 E Santa Cruz Ave

City

Orange

State

CA

Zip Code

92869-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Medicare W

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-100

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Gary A. Culp

Mailing Address 7911 E Santa Cruz Ave

City

Orange

State

CA

Zip Code

92869-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Medicare W

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-100

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Kenneth P. D'Amico

Mailing Address 19 Kuhn Dr

City

Furlong

State

PA

Zip Code

18925-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Architect II

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

228.33

Date of Receipt

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

Transaction ID: 112010-145

Amount of Each Receipt this Period

20.00

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 60 / 281

(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)

Kenneth P. D'Amico

Mailing Address 19 Kuhn Dr

City

State

Zip Code

Furlong

PA

18925-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Architect II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-146

Amount of Each Receipt this Period

8.33

B.

Full Name (Last, First, Middle Initial)

Diane S. DAgostino

Mailing Address 218 Switch Oak

City

State

Zip Code

Shavano Park

TX

78230-5621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Wrkf Effec & Tal Acq

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-367

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Diane S. DAgostino

Mailing Address 218 Switch Oak

City

State

Zip Code

Shavano Park

TX

78230-5621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Wrkf Effec & Tal Acq

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-366

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

108.33

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 61 / 281

(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)

Patricia R. Daley

Mailing Address 5375 N Oconto Ave

City

Chicago

State

IL

Zip Code

60656-1829

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Underwriting Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-6

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Patricia R. Daley

Mailing Address 5375 N Oconto Ave

City

Chicago

State

IL

Zip Code

60656-1829

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Underwriting Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-6

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Robert J. Danie

Mailing Address 9 Wagon Wheel Dr

City

Feeding Hills

State

MA

Zip Code

01030-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Tech Infrastructure Supp Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-445

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: PAGE 62 / 281

(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)

Robert J. Danie

Mailing Address 9 Wagon Wheel Dr

City

Feeding Hills

State

MA

Zip Code

01030-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Tech Infrastructure Supp Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-443

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Robert Davis

Mailing Address 15 Heatherwood Dr

City

Madison

State

CT

Zip Code

06443-1840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Private Equity Investment Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-483

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Robert Davis

Mailing Address 15 Heatherwood Dr

City

Madison

State

CT

Zip Code

06443-1840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Private Equity Investment Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-481

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: PAGE 63 / 281

(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)

Debra A. DeNardis

Mailing Address 15 Grimes Rd

City

Rocky Hill

State

CT

Zip Code

06067-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of NCO Plan Sponsor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: 112010-284

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Debra A. DeNardis

Mailing Address 15 Grimes Rd

City

Rocky Hill

State

CT

Zip Code

06067-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of NCO Plan Sponsor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-283

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Janice Deskus

Mailing Address 56 Old Farms Rd

City

Willington

State

CT

Zip Code

06279-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HR BP Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-49

Amount of Each Receipt this Period

50.00

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: PAGE 64 / 281

(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)

Janice Deskus

Mailing Address 56 Old Farms Rd

City

Willington

State

CT

Zip Code

06279-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HR BP Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-49

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Samuel Di Philippo

Mailing Address 36 Prospect Bay Dr W

City

Grasonville

State

MD

Zip Code

21638-1184

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

GRP Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-54

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Samuel Di Philippo

Mailing Address 36 Prospect Bay Dr W

City

Grasonville

State

MD

Zip Code

21638-1184

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

GRP Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-54

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

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 / 281

(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)

Kathleen A. Dibble

Mailing Address 835 Calle Compo

City

Thousand Oaks

State

CA

Zip Code

91360-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-162

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Kathleen A. Dibble

Mailing Address 835 Calle Compo

City

Thousand Oaks

State

CA

Zip Code

91360-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-163

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Russell R. Dickhart

Mailing Address 509 Maplewood Rd

City

Wayne

State

PA

Zip Code

19087-4718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Hd Public & Labor-East

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4325.00

Date of Receipt

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

Transaction ID: 112010-220

Amount of Each Receipt this Period

375.00

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 66 / 281

(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)

Russell R. Dickhart

Mailing Address 509 Maplewood Rd

City

Wayne

State

PA

Zip Code

19087-4718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Hd Public & Labor-East

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4325.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-219

Amount of Each Receipt this Period

375.00

B.

Full Name (Last, First, Middle Initial)

Bradley M. Dirks

Mailing Address 82 N Acacia Dr

City

Gilbert

State

AZ

Zip Code

85233-5126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1183.33

Date of Receipt

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

Transaction ID: 112010-192

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Bradley M. Dirks

Mailing Address 82 N Acacia Dr

City

Gilbert

State

AZ

Zip Code

85233-5126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1183.33

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-192

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)

558.33

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 67 / 281

(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)

Michael T. Dobbs

Mailing Address 15600 Gooseberry Ct

City

North Potomac

State

MD

Zip Code

20878-4919

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

INT Natl Head of Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-426

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Michael T. Dobbs

Mailing Address 15600 Gooseberry Ct

City

North Potomac

State

MD

Zip Code

20878-4919

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

INT Natl Head of Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-424

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

David T. Doherty

Mailing Address 78 Millstone Dr

City

Marlborough

State

CT

Zip Code

06447-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Asst Controller, FinRpt&Policy

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 112010-607

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

85.00

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 / 281

(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)

David T. Doherty

Mailing Address 78 Millstone Dr

City

Marlborough

State

CT

Zip Code

06447-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Asst Controller, FinRpt&Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-605

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Elizabeth C. Donnelly

Mailing Address 117 Westwood Ln

City

Middletown

State

CT

Zip Code

06457-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-307

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Elizabeth C. Donnelly

Mailing Address 117 Westwood Ln

City

Middletown

State

CT

Zip Code

06457-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-306

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

85.00

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 69 / 281

(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)

Donald W. Doppmann

Mailing Address 470 Stoney Point Way
Unit 150

City	State	Zip Code
Oceanside	CA	92058-7215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
MDCR Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

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

Transaction ID: 112010-431

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Donald W. Doppmann

Mailing Address 470 Stoney Point Way
Unit 150

City	State	Zip Code
Oceanside	CA	92058-7215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
MDCR Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-429

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Karen Smith Douyard

Mailing Address 33 Westmont St

City	State	Zip Code
West Hartford	CT	06117-2928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-397

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

55.00

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 70 / 281

(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)

Karen Smith Douyard

Mailing Address 33 Westmont St

City

West Hartford

State

CT

Zip Code

06117-2928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-396

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Roberta L. Downey

Mailing Address 28 Freedom Way

City

Glastonbury

State

CT

Zip Code

06033-2841

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Strategic Sys & Processes

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: 112010-218

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Roberta L. Downey

Mailing Address 28 Freedom Way

City

Glastonbury

State

CT

Zip Code

06033-2841

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Strategic Sys & Processes

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-217

Amount of Each Receipt this Period

200.00

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 71 / 281

(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)

Edward S. Doyle

Mailing Address 17 Stonehenge Rd

City

Morristown

State

NJ

Zip Code

07960-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Emrgng Bus & Srat Initiativ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

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

Transaction ID: 112010-541

Amount of Each Receipt this Period

83.33

B.

Full Name (Last, First, Middle Initial)

Edward S. Doyle

Mailing Address 17 Stonehenge Rd

City

Morristown

State

NJ

Zip Code

07960-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Emrgng Bus & Srat Initiativ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-539

Amount of Each Receipt this Period

83.33

C.

Full Name (Last, First, Middle Initial)

George J. Doyle

Mailing Address 19 Fundus Rd

City

West Orange

State

NJ

Zip Code

07052-3510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-94

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

191.66

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 72 / 281

(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)

George J. Doyle

Mailing Address 19 Fundus Rd

City

West Orange

State

NJ

Zip Code

07052-3510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-94

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Lois A. Eddins

Mailing Address 85 Roxbury Rd

City

Plantsville

State

CT

Zip Code

06479-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Manager, Product Mgmt/Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-235

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Lois A. Eddins

Mailing Address 85 Roxbury Rd

City

Plantsville

State

CT

Zip Code

06479-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Manager, Product Mgmt/Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-234

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: PAGE 73 / 281

(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)

Cheryl R. Edwardsen

Mailing Address 6241 Toscana Cir

City

Fort Worth

State

TX

Zip Code

76140-8239

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Product Dev, SGB

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-35

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Cheryl R. Edwardsen

Mailing Address 6241 Toscana Cir

City

Fort Worth

State

TX

Zip Code

76140-8239

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Product Dev, SGB

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-35

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Jeff Emerson

Mailing Address 86 Country Mile Rd
PO Box 313

City

Georgetown

State

ME

Zip Code

04548-3112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of HCM and Regions

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.96

Date of Receipt

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

Transaction ID: 112010-507

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

408.33

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 74 / 281

(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)

Jeff Emerson

Mailing Address 86 Country Mile Rd
PO Box 313

City State Zip Code
Georgetown ME 04548-3112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Head of HCM and Regions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.96

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-505

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Susan Empie-Iozzo

Mailing Address 4 Riverdale Dr

City State Zip Code
Cromwell CT 06416-1520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Head of Select Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: 112010-318

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Susan Empie-Iozzo

Mailing Address 4 Riverdale Dr

City State Zip Code
Cromwell CT 06416-1520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Head of Select Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-317

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

308.33

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 75 / 281

(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)

Katherine A. Eskra

Mailing Address 3218 E Maldonado Dr

City

Phoenix

State

AZ

Zip Code

85042-6117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicaid LTC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: 112010-193

Amount of Each Receipt this Period

62.50

B.

Full Name (Last, First, Middle Initial)

Katherine A. Eskra

Mailing Address 3218 E Maldonado Dr

City

Phoenix

State

AZ

Zip Code

85042-6117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicaid LTC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-193

Amount of Each Receipt this Period

62.50

C.

Full Name (Last, First, Middle Initial)

John J. Esslinger

Mailing Address 4944 W 151st Ter

City

Leawood

State

KS

Zip Code

66224-9744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 112010-26

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 76 / 281

(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)

John J. Esslinger

Mailing Address 4944 W 151st Ter

City

Leawood

State

KS

Zip Code

66224-9744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-26

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Patricia A. Farrell

Mailing Address 1149 Kettle Pond Ln

City

Great Falls

State

VA

Zip Code

22066-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Govt & Spec Businesses

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-355

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Patricia A. Farrell

Mailing Address 1149 Kettle Pond Ln

City

Great Falls

State

VA

Zip Code

22066-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Govt & Spec Businesses

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-354

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)

933.32

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 77 / 281

(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)

Amanda Christine Fedon

Mailing Address 31 Alexandra Way

City

Clinton

State

NJ

Zip Code

08809-2624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-127

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Amanda Christine Fedon

Mailing Address 31 Alexandra Way

City

Clinton

State

NJ

Zip Code

08809-2624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-127

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Michael W. Fedyna

Mailing Address 1836 Howe Ln

City

Maple Glen

State

PA

Zip Code

19002-2915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4875.00

Date of Receipt

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

Transaction ID: 112010-178

Amount of Each Receipt this Period

406.25

SUBTOTAL of Receipts This Page (optional)

456.25

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 78 / 281

(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 Ln

City

Maple Glen

State

PA

Zip Code

19002-2915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4875.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-178

Amount of Each Receipt this Period

406.25

B.

Full Name (Last, First, Middle Initial)

Michelle D. Ferensic-Smith

Mailing Address 404 Kentucky Branch Ln

City

Jacksonville

State

FL

Zip Code

32259-8863

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Claim & Provider Svc Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-558

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Michelle D. Ferensic-Smith

Mailing Address 404 Kentucky Branch Ln

City

Jacksonville

State

FL

Zip Code

32259-8863

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Claim & Provider Svc Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-556

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

506.25

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 79 / 281

(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)

Elysa P. Ferrara

Mailing Address 96 Menemsha Ln

City

Wynantskill

State

NY

Zip Code

12198-3435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-479

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Elysa P. Ferrara

Mailing Address 96 Menemsha Ln

City

Wynantskill

State

NY

Zip Code

12198-3435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-477

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Deanna Fidler

Mailing Address 6017 W 142nd St

City

Overland Park

State

KS

Zip Code

66223-2963

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Talent Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-13

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: PAGE 80 / 281

(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)

Deanna Fidler

Mailing Address 6017 W 142nd St

City

Overland Park

State

KS

Zip Code

66223-2963

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Talent Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-13

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Brian K. Fischer

Mailing Address 24059 N 113th Way

City

Scottsdale

State

AZ

Zip Code

85255-5642

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Unit Fin Officer, Medicaid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: 112010-197

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Brian K. Fischer

Mailing Address 24059 N 113th Way

City

Scottsdale

State

AZ

Zip Code

85255-5642

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Unit Fin Officer, Medicaid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-197

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

275.00

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 81 / 281

(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)

Dean E. Fiscus

Mailing Address 4 Squire HI

City

Old Lyme

State

CT

Zip Code

06371-1356

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of LEC Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-344

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Dean E. Fiscus

Mailing Address 4 Squire HI

City

Old Lyme

State

CT

Zip Code

06371-1356

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of LEC Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-343

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Daniel R. Fishbein

Mailing Address 6 Hunts Point Rd

City

Cape Elizabeth

State

ME

Zip Code

04107-2903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Of GI, Dental & Vision

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.96

Date of Receipt

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

Transaction ID: 112010-506

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

408.33

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 82 / 281

(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)

Daniel R. Fishbein

Mailing Address 6 Hunts Point Rd

City

Cape Elizabeth

State

ME

Zip Code

04107-2903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Of GI, Dental & Vision

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.96

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-504

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Stephen P. Fisher

Mailing Address 19 Clifton Ave

City

West Hartford

State

CT

Zip Code

06107-1718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-348

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Stephen P. Fisher

Mailing Address 19 Clifton Ave

City

West Hartford

State

CT

Zip Code

06107-1718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-347

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

258.33

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 83 / 281

(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)

Michael A. Flammini

Mailing Address 3 Kilbourn Farms

City

Simsbury

State

CT

Zip Code

06070-1271

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Strategic Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-103

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Michael A. Flammini

Mailing Address 3 Kilbourn Farms

City

Simsbury

State

CT

Zip Code

06070-1271

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Strategic Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-103

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Joseph P. Foley

Mailing Address 90 Lancaster Rd

City

West Hartford

State

CT

Zip Code

06119-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-43

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 84 / 281

(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)

Joseph P. Foley

Mailing Address 90 Lancaster Rd

City

West Hartford

State

CT

Zip Code

06119-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-43

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Cynthia J. Follmer Crowley

Mailing Address 5426 Dunwoody Glen Ct

City

Atlanta

State

GA

Zip Code

30360-1364

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Medicare SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-159

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Cynthia J. Follmer Crowley

Mailing Address 5426 Dunwoody Glen Ct

City

Atlanta

State

GA

Zip Code

30360-1364

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Medicare SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-160

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

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 85 / 281

(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)

James B. Foote

Mailing Address 22535 N Linden Dr

City

Lake Barrington

State

IL

Zip Code

60010-5917

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Comp & Benefits

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: 112010-10

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

James B. Foote

Mailing Address 22535 N Linden Dr

City

Lake Barrington

State

IL

Zip Code

60010-5917

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Comp & Benefits

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-10

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Anita M. Forbes

Mailing Address 9650 Alderwood

City

San Antonio

State

TX

Zip Code

78250-3171

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Case Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

679.15

Date of Receipt

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

Transaction ID: 112010-487

Amount of Each Receipt this Period

65.83

SUBTOTAL of Receipts This Page (optional)

265.83

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 86 / 281

(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)

Anita M. Forbes

Mailing Address 9650 Alderwood

City

San Antonio

State

TX

Zip Code

78250-3171

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Case Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

679.15

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-485

Amount of Each Receipt this Period

65.83

B.

Full Name (Last, First, Middle Initial)

Brian T. Forbes

Mailing Address 5802 E 104th St

City

Tulsa

State

OK

Zip Code

74137-7054

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-238

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Brian T. Forbes

Mailing Address 5802 E 104th St

City

Tulsa

State

OK

Zip Code

74137-7054

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-237

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

265.83

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

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(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)

Kristie Foust

Mailing Address 29667 English Way

City

Novi

State

MI

Zip Code

48377-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-119

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Kristie Foust

Mailing Address 29667 English Way

City

Novi

State

MI

Zip Code

48377-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-119

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Peter A. Francel

Mailing Address 6 Carriage Path

City

Chadds Ford

State

PA

Zip Code

19317-9194

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, BH & EAP Sales & Strateg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1380.00

Date of Receipt

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

Transaction ID: 112010-277

Amount of Each Receipt this Period

115.00

SUBTOTAL of Receipts This Page (optional)

215.00

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 88 / 281

(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)

Peter A. Francel

Mailing Address 6 Carriage Path

City

Chadds Ford

State

PA

Zip Code

19317-9194

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, BH & EAP Sales & Strateg

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1380.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-276

Amount of Each Receipt this Period

115.00

B.

Full Name (Last, First, Middle Initial)

Kris Frank

Mailing Address 4771 Marlborough Way

City

Carmichael

State

CA

Zip Code

95608-6244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.04

Date of Receipt

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

Transaction ID: 112010-62

Amount of Each Receipt this Period

166.67

C.

Full Name (Last, First, Middle Initial)

Kris Frank

Mailing Address 4771 Marlborough Way

City

Carmichael

State

CA

Zip Code

95608-6244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.04

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-62

Amount of Each Receipt this Period

166.67

SUBTOTAL of Receipts This Page (optional)

448.34

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 89 / 281

(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)

Robert J. Franzoi

Mailing Address 420 Bowen Dr

City

Exton

State

PA

Zip Code

19341-2358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Net & Med Econ NE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-448

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Robert J. Franzoi

Mailing Address 420 Bowen Dr

City

Exton

State

PA

Zip Code

19341-2358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Net & Med Econ NE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-446

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Kathleen M. Freund

Mailing Address 20 Anthony Dr

City

Rocky Point

State

NY

Zip Code

11778-6600

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Project Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-532

Amount of Each Receipt this Period

20.00

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 90 / 281

(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)

Kathleen M. Freund

Mailing Address 20 Anthony Dr

City

Rocky Point

State

NY

Zip Code

11778-6600

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-530

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Mark S. Friedlander

Mailing Address 213 Elm Ter

City

Narberth

State

PA

Zip Code

19072-1601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-609

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mark S. Friedlander

Mailing Address 213 Elm Ter

City

Narberth

State

PA

Zip Code

19072-1601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-607

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: PAGE 91 / 281

(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)

Christine M. Gagnon

Mailing Address 62 Chapman Dr

City

Glastonbury

State

CT

Zip Code

06033-2728

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief of Staff, International

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1388.16

Date of Receipt

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

Transaction ID: 112010-321

Amount of Each Receipt this Period

115.68

B.

Full Name (Last, First, Middle Initial)

Christine M. Gagnon

Mailing Address 62 Chapman Dr

City

Glastonbury

State

CT

Zip Code

06033-2728

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief of Staff, International

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1388.16

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-320

Amount of Each Receipt this Period

115.68

C.

Full Name (Last, First, Middle Initial)

Robert C. Galle

Mailing Address 45 Castlerock Ln

City

Bolton

State

CT

Zip Code

06043-7856

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Pharmacy Benefit Mgmt Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-179

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

256.36

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 92 / 281

(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 C. Galle

Mailing Address 45 Castlerock Ln

City

Bolton

State

CT

Zip Code

06043-7856

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Pharmacy Benefit Mgmt Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-179

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mark Garber

Mailing Address 35 Sheffield Ln

City

Avon

State

CT

Zip Code

06001-3188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Alternative Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-323

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mark Garber

Mailing Address 35 Sheffield Ln

City

Avon

State

CT

Zip Code

06001-3188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Alternative Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-322

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 93 / 281

(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)

Emma Garcia

Mailing Address 9435 NW 42nd St

City

Sunrise

State

FL

Zip Code

33351-7699

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-138

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Emma Garcia

Mailing Address 9435 NW 42nd St

City

Sunrise

State

FL

Zip Code

33351-7699

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Claim Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-139

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey R. Garnett

Mailing Address 8 Oxbow Dr

City

Vernon

State

CT

Zip Code

06066-4313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-126

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 94 / 281

(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)

Jeffrey R. Garnett

Mailing Address 8 Oxbow Dr

City

Vernon

State

CT

Zip Code

06066-4313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-126

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Michael Patrick Gaul

Mailing Address 28 Lawton Dr

City

Simsbury

State

CT

Zip Code

06070-2727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

System Support Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

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

Transaction ID: 112010-183

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Michael Patrick Gaul

Mailing Address 28 Lawton Dr

City

Simsbury

State

CT

Zip Code

06070-2727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

System Support Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-183

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

85.00

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 95 / 281

(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)

Bryan J. Geremia

Mailing Address 5169 Evanwood Ave

City

Oak Park

State

CA

Zip Code

91377-4815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Dental Regional Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: 112010-410

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Bryan J. Geremia

Mailing Address 5169 Evanwood Ave

City

Oak Park

State

CA

Zip Code

91377-4815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Dental Regional Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-408

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Albert Germann

Mailing Address 9633 Oak Summit Ave

City

Baltimore

State

MD

Zip Code

21234-1823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

FRAP Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

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

Transaction ID: 112010-206

Amount of Each Receipt this Period

45.00

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 96 / 281

(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)

Albert Germann

Mailing Address 9633 Oak Summit Ave

City

Baltimore

State

MD

Zip Code

21234-1823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

FRAP Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-205

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

Mohit M. Ghose

Mailing Address 11 Creekside Ln

City

West Hartford

State

CT

Zip Code

06107-3161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2196.00

Date of Receipt

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

Transaction ID: 112010-3

Amount of Each Receipt this Period

183.00

C.

Full Name (Last, First, Middle Initial)

Mohit M. Ghose

Mailing Address 11 Creekside Ln

City

West Hartford

State

CT

Zip Code

06107-3161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2196.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-3

Amount of Each Receipt this Period

183.00

SUBTOTAL of Receipts This Page (optional)

411.00

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 97 / 281

(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)

Gail Susan Goede

Mailing Address 403 Pinehurst Ct

City

Harleysville

State

PA

Zip Code

19438-3071

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-64

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Gail Susan Goede

Mailing Address 403 Pinehurst Ct

City

Harleysville

State

PA

Zip Code

19438-3071

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-64

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Molly M. Goins-Cox

Mailing Address 147 Ridgewood Rd

City

West Hartford

State

CT

Zip Code

06107-3508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Hd, Member Experience Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-551

Amount of Each Receipt this Period

25.00

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 98 / 281

(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)

Molly M. Goins-Cox

Mailing Address 147 Ridgewood Rd

City

West Hartford

State

CT

Zip Code

06107-3508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Member Experience Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-549

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Derek S. Goldberg

Mailing Address 606 Canoe Run PI

City

Manakin Sabot

State

VA

Zip Code

23103-3211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Managing Director, SE Asia

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-163

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Derek S. Goldberg

Mailing Address 606 Canoe Run PI

City

Manakin Sabot

State

VA

Zip Code

23103-3211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Managing Director, SE Asia

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-164

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: PAGE 99 / 281

(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)

Michael Golinkoff

Mailing Address 111 Colwyn Ln

City

Bala Cynwyd

State

PA

Zip Code

19004-2310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head BH Clinical & Service Del

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-97

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Michael Golinkoff

Mailing Address 111 Colwyn Ln

City

Bala Cynwyd

State

PA

Zip Code

19004-2310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head BH Clinical & Service Del

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-97

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Jerald B. Gooden

Mailing Address 15 Wyndham Ln

City

Farmington

State

CT

Zip Code

06032-2758

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Northeast

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: 112010-261

Amount of Each Receipt this Period

175.00

SUBTOTAL of Receipts This Page (optional)

275.00

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 100 / 281

(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)

Jerald B. Gooden

Mailing Address 15 Wyndham Ln

City

Farmington

State

CT

Zip Code

06032-2758

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Northeast

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-260

Amount of Each Receipt this Period

175.00

B.

Full Name (Last, First, Middle Initial)

Kenneth J. Goodheart

Mailing Address 2570 Camden Glen Ct

City

Roswell

State

GA

Zip Code

30076-3781

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-147

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Kenneth J. Goodheart

Mailing Address 2570 Camden Glen Ct

City

Roswell

State

GA

Zip Code

30076-3781

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-148

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 101 / 281

(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 V. Graves

Mailing Address 179 Wildwood Ave

City

Madison

State

CT

Zip Code

06443-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Integration Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-388

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Susan V. Graves

Mailing Address 179 Wildwood Ave

City

Madison

State

CT

Zip Code

06443-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Integration Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-387

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Floyd W. Green

Mailing Address 221 Trumbull St
Apt 3005

City

Hartford

State

CT

Zip Code

06103-1528

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Comm Rel & Urban Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-87

Amount of Each Receipt this Period

100.00

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 102 / 281

(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)

Floyd W. Green

Mailing Address 221 Trumbull St
Apt 3005

City State Zip Code
Hartford CT 06103-1528

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Hd, Comm Rel & Urban Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-87

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Allan I. Greenberg

Mailing Address 1505 Old Barn Ln

City State Zip Code
Highland Park IL 60035-3686

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Region Head Net & Med Econ MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-592

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Allan I. Greenberg

Mailing Address 1505 Old Barn Ln

City State Zip Code
Highland Park IL 60035-3686

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Region Head Net & Med Econ MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-590

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 103 / 281

(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)

Thomas J. Grote

Mailing Address 10109 Bracken Dr

City

Ellicott City

State

MD

Zip Code

21042-1674

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

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

Transaction ID: 112010-327

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Thomas J. Grote

Mailing Address 10109 Bracken Dr

City

Ellicott City

State

MD

Zip Code

21042-1674

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-326

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Garth R. Groves

Mailing Address 160 Beebe Farms Rd

City

Coventry

State

CT

Zip Code

06238-2450

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, M & A Integration, Pharm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-362

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

500.00

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 104 / 281

(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)

Garth R. Groves

Mailing Address 160 Beebe Farms Rd

City

Coventry

State

CT

Zip Code

06238-2450

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, M & A Integration, Pharm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-361

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Michael J. Guyette

Mailing Address 2678 Mabry Rd NE

City

Atlanta

State

GA

Zip Code

30319-2824

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-136

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Phillip J. Haas

Mailing Address 4515 145th PI SE

City

Bellevue

State

WA

Zip Code

98006-2479

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-371

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 105 / 281

(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)

Phillip J. Haas

Mailing Address 4515 145th PI SE

City

Bellevue

State

WA

Zip Code

98006-2479

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-370

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

John J. Hackendorn

Mailing Address 15 Hop Brook Rd

City

Simsbury

State

CT

Zip Code

06070-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Asst Head of Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-95

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

John J. Hackendorn

Mailing Address 15 Hop Brook Rd

City

Simsbury

State

CT

Zip Code

06070-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Asst Head of Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-95

Amount of Each Receipt this Period

25.00

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 106 / 281

(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)

Laketa Haddox

Mailing Address 132 Byers Dr

City

Ball Ground

State

GA

Zip Code

30107-3177

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-546

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Laketa Haddox

Mailing Address 132 Byers Dr

City

Ball Ground

State

GA

Zip Code

30107-3177

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-544

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Katherine Hamilton

Mailing Address 4677 McCurdy Dr

City

New Albany

State

OH

Zip Code

43054-9631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

GRP Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-72

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: PAGE 107 / 281

(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)

Katherine Hamilton

Mailing Address 4677 McCurdy Dr

City

New Albany

State

OH

Zip Code

43054-9631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

GRP Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-72

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Pennell Witham Hamilton

Mailing Address 28 Park Ln

City

Woodbridge

State

CT

Zip Code

06525-2027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Unit Fin Officer, LEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-264

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Pennell Witham Hamilton

Mailing Address 28 Park Ln

City

Woodbridge

State

CT

Zip Code

06525-2027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Unit Fin Officer, LEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-263

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 108 / 281

(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)

Brian D. Hammer

Mailing Address 13914 Mallard Dr

City

Rogers

State

MN

Zip Code

55374-8772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-361

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Brian D. Hammer

Mailing Address 13914 Mallard Dr

City

Rogers

State

MN

Zip Code

55374-8772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-360

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Thomas K. Handy

Mailing Address 138 Barry Ave

City

Ridgefield

State

CT

Zip Code

06877-4329

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Real Estate & Facil Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-40

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 109 / 281

(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)

Thomas K. Handy

Mailing Address 138 Barry Ave

City

Ridgefield

State

CT

Zip Code

06877-4329

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Real Estate & Facil Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-40

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Nancy C. Hannan

Mailing Address 63 Riverside Dr

City

South Windsor

State

CT

Zip Code

06074-1565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-154

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Nancy C. Hannan

Mailing Address 63 Riverside Dr

City

South Windsor

State

CT

Zip Code

06074-1565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-155

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: PAGE 110 / 281

(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 A. Hansen

Mailing Address 26 Barberry Dr

City

Burlington

State

CT

Zip Code

06013-1508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Actuary II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-333

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Robert A. Hansen

Mailing Address 26 Barberry Dr

City

Burlington

State

CT

Zip Code

06013-1508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Actuary II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-332

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Jayna Harley

Mailing Address 6319 Torrington Rd

City

Nashville

State

TN

Zip Code

37205-3155

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-395

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

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 111 / 281

(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)

Jayna Harley

Mailing Address 6319 Torrington Rd

City

Nashville

State

TN

Zip Code

37205-3155

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-394

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Frederick R. Hatfield

Mailing Address 1392 W Indigo Dr

City

Chandler

State

AZ

Zip Code

85248-4384

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Medicaid Ops & Integration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 112010-501

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Frederick R. Hatfield

Mailing Address 1392 W Indigo Dr

City

Chandler

State

AZ

Zip Code

85248-4384

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Medicaid Ops & Integration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-499

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

520.00

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 112 / 281

(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)

Louie Martin Heerwagen, III

Mailing Address 6026 FM 1886

City

Azle

State

TX

Zip Code

76020-1028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-509

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Louie Martin Heerwagen, III

Mailing Address 6026 FM 1886

City

Azle

State

TX

Zip Code

76020-1028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-507

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Todd D. Henderson

Mailing Address 116 Heatherwood Dr

City

Colchester

State

CT

Zip Code

06415-1862

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-302

Amount of Each Receipt this Period

25.00

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 113 / 281

(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)

Todd D. Henderson

Mailing Address 116 Heatherwood Dr

City

Colchester

State

CT

Zip Code

06415-1862

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-301

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Jonathan S. Hendrix

Mailing Address 17 Blackberry Dr

City

Hudson

State

OH

Zip Code

44236-4703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-587

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Jonathan S. Hendrix

Mailing Address 17 Blackberry Dr

City

Hudson

State

OH

Zip Code

44236-4703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-585

Amount of Each Receipt this Period

50.00

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 114 / 281

(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)

Dewayne M. Hiebert

Mailing Address 322 Maple Shade Rd

City

Middletown

State

CT

Zip Code

06457-7105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-574

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Dewayne M. Hiebert

Mailing Address 322 Maple Shade Rd

City

Middletown

State

CT

Zip Code

06457-7105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-572

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Joel D. Hodge

Mailing Address 3318 La Salle St

City

Houston

State

TX

Zip Code

77027-6316

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Dntl Ntwks, Adm & Clin Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: 112010-547

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

190.00

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 115 / 281

(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)

Joel D. Hodge

Mailing Address 3318 La Salle St

City

Houston

State

TX

Zip Code

77027-6316

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Dntl Ntwks, Adm & Clin Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-545

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Ralph A. Holmes

Mailing Address 5100 Lorraine Dr

City

Frisco

State

TX

Zip Code

75034-6302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-474

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Ralph A. Holmes

Mailing Address 5100 Lorraine Dr

City

Frisco

State

TX

Zip Code

75034-6302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-472

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

190.00

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 116 / 281

(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)

Kim M. Hook

Mailing Address 4857 Wild Heron Way

City

Jacksonville

State

FL

Zip Code

32225-1057

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Project / Team Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-550

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Walter H. Hoskins

Mailing Address 210 W Bowmore Dr

City

Blythewood

State

SC

Zip Code

29016-7125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Actuary II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1389.96

Date of Receipt

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

Transaction ID: 112010-209

Amount of Each Receipt this Period

115.83

C.

Full Name (Last, First, Middle Initial)

Walter H. Hoskins

Mailing Address 210 W Bowmore Dr

City

Blythewood

State

SC

Zip Code

29016-7125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Actuary II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1389.96

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-208

Amount of Each Receipt this Period

115.83

SUBTOTAL of Receipts This Page (optional)

281.66

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 117 / 281

(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)

Jean L. Howe

Mailing Address 21702 Lanar

City

Mission Viejo

State

CA

Zip Code

92692-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-575

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Jean L. Howe

Mailing Address 21702 Lanar

City

Mission Viejo

State

CA

Zip Code

92692-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-573

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Michael W. Hudson

Mailing Address 210 Northington Dr

City

Avon

State

CT

Zip Code

06001-2359

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Care Mgmt Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: 112010-554

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

165.00

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 118 / 281

(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)

Michael W. Hudson

Mailing Address 210 Northington Dr

City

Avon

State

CT

Zip Code

06001-2359

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Care Mgmt Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-552

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Regina Murphy Hunter

Mailing Address 413 Copperfield St

City

Southlake

State

TX

Zip Code

76092-2223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head of Sales MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-378

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Regina Murphy Hunter

Mailing Address 413 Copperfield St

City

Southlake

State

TX

Zip Code

76092-2223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head of Sales MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-377

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

275.00

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 119 / 281

(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)

Craig W. Hurty

Mailing Address 178 Ethan Dr

City

Windsor

State

CT

Zip Code

06095-1670

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HR BP Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-528

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Craig W. Hurty

Mailing Address 178 Ethan Dr

City

Windsor

State

CT

Zip Code

06095-1670

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HR BP Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-526

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Carol B. Ingher

Mailing Address 121 Blackberry Dr

City

Stamford

State

CT

Zip Code

06903-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-286

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 120 / 281

(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)

Carol B. Ingher

Mailing Address 121 Blackberry Dr

City

Stamford

State

CT

Zip Code

06903-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales & Svc

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-285

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Richard H. Ingraham

Mailing Address 23 High Ridge Rd

City

Cromwell

State

CT

Zip Code

06416-2430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Applications Dvlpmnt

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.33

Date of Receipt

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

Transaction ID: 112010-288

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Richard H. Ingraham

Mailing Address 23 High Ridge Rd

City

Cromwell

State

CT

Zip Code

06416-2430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Applications Dvlpmnt

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.33

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-287

Amount of Each Receipt this Period

33.33

SUBTOTAL of Receipts This Page (optional)

78.33

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 121 / 281

(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 Adlis Iovino

Mailing Address 1823 Solitaire Ln

City

McLean

State

VA

Zip Code

22101-4235

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID: 112010-591

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

Charlyn Adlis Iovino

Mailing Address 1823 Solitaire Ln

City

McLean

State

VA

Zip Code

22101-4235

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-589

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

Christopher L. Jagmin

Mailing Address 8181 Douglas Ave

City

Dallas

State

TX

Zip Code

75225-6561

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Senior Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

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

Transaction ID: 112010-489

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

850.00

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 122 / 281

(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)

Christopher L. Jagmin

Mailing Address 8181 Douglas Ave
610City State Zip Code
Dallas TX 75225-6561FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.Occupation
Senior Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-487

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Joyce Parson James

Mailing Address 1296 Beacon Cir

City State Zip Code
Wellington FL 33414-3152FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.Occupation
SGB Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-411

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Joyce Parson James

Mailing Address 1296 Beacon Cir

City State Zip Code
Wellington FL 33414-3152FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.Occupation
SGB Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-409

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional) ▶

450.00

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 123 / 281

(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)

Anthony A. Janakas

Mailing Address 211 Regency Park Dr

City

Agawam

State

MA

Zip Code

01001-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

RES Sr. Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-582

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Anthony A. Janakas

Mailing Address 211 Regency Park Dr

City

Agawam

State

MA

Zip Code

01001-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

RES Sr. Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-580

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Eric Jeandell

Mailing Address 1407 Granby Way

City

West Chester

State

PA

Zip Code

19380-1748

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Architect Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-90

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 124 / 281

(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)

Eric Jeandell

Mailing Address 1407 Granby Way

City

West Chester

State

PA

Zip Code

19380-1748

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Architect Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-90

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Joseph E. Jenkinson

Mailing Address 84 Lamentation Dr

City

Berlin

State

CT

Zip Code

06037-3730

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-224

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Joseph E. Jenkinson

Mailing Address 84 Lamentation Dr

City

Berlin

State

CT

Zip Code

06037-3730

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-223

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 125 / 281

(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)

Keith W. Johnson

Mailing Address 11913 W 141st St

City

Overland Park

State

KS

Zip Code

66221-2901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

GRP Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-149

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Keith W. Johnson

Mailing Address 11913 W 141st St

City

Overland Park

State

KS

Zip Code

66221-2901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

GRP Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-150

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Pamela Mk Johnson

Mailing Address 323 Emanuel Cleaver II Blvd
Apt 7F

City

Kansas City

State

MO

Zip Code

64112-1639

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr. Mgr, Medicaid Health Plan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.33

Date of Receipt

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

Transaction ID: 112010-213

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: PAGE 126 / 281

(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)

Pamela Mk Johnson

Mailing Address 323 Emanuel Cleaver II Blvd
Apt 7F

City	State	Zip Code
Kansas City	MO	64112-1639

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Sr. Mgr, Medicaid Health Plan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-212

Amount of Each Receipt this Period

33.33

B.

Full Name (Last, First, Middle Initial)

Yolanda G. Johnson

Mailing Address 4700 Shellbark Dr

City	State	Zip Code
Ypsilanti	MI	48197-6832

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Sr Employee Relations Cnslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-563

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Yolanda G. Johnson

Mailing Address 4700 Shellbark Dr

City	State	Zip Code
Ypsilanti	MI	48197-6832

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Sr Employee Relations Cnslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-561

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

83.33

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 127 / 281

(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)

Climentene Jones

Mailing Address 9439 S Wabash Ave

City

Chicago

State

IL

Zip Code

60619-7235

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-405

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Climentene Jones

Mailing Address 9439 S Wabash Ave

City

Chicago

State

IL

Zip Code

60619-7235

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-404

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Judith Jones

Mailing Address 7 Hillyer Way

City

Granby

State

CT

Zip Code

06035-2930

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Corporate Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

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

Transaction ID: 112010-337

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 128 / 281

(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)

Judith Jones

Mailing Address 7 Hillyer Way

City

Granby

State

CT

Zip Code

06035-2930

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Corporate Secretary

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-336

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Margaret D. Jordan

Mailing Address 19 Jacobson Farm Rd

City

East Hampton

State

CT

Zip Code

06424-1660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-175

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Margaret D. Jordan

Mailing Address 19 Jacobson Farm Rd

City

East Hampton

State

CT

Zip Code

06424-1660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-175

Amount of Each Receipt this Period

50.00

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 129 / 281

(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)

Ruby Kao

Mailing Address 1221 Stoney Creek Dr

City

San Ramon

State

CA

Zip Code

94582-5627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Actuary I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-33

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Ruby Kao

Mailing Address 1221 Stoney Creek Dr

City

San Ramon

State

CA

Zip Code

94582-5627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Actuary I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-33

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Kim A. Keck

Mailing Address 3 Buena Vista Rd

City

West Hartford

State

CT

Zip Code

06107-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Head Middle Markets

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2520.00

Date of Receipt

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

Transaction ID: 112010-343

Amount of Each Receipt this Period

210.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 130 / 281

(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)

Kim A. Keck

Mailing Address 3 Buena Vista Rd

City

West Hartford

State

CT

Zip Code

06107-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Middle Markets

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2520.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-342

Amount of Each Receipt this Period

210.00

B.

Full Name (Last, First, Middle Initial)

Thomas L. Kelly

Mailing Address 1326 N Central Ave
Unit 409

City

Phoenix

State

AZ

Zip Code

85004-1758

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicaid Segment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-205

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Thomas L. Kelly

Mailing Address 1326 N Central Ave
Unit 409

City

Phoenix

State

AZ

Zip Code

85004-1758

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicaid Segment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-204

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)

1043.32

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 131 / 281

(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)

Timothy G. Kelly

Mailing Address 33 Highview Rd

City

Caldwell

State

NJ

Zip Code

07006-5501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.66

Date of Receipt

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

Transaction ID: 112010-124

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Timothy G. Kelly

Mailing Address 33 Highview Rd

City

Caldwell

State

NJ

Zip Code

07006-5501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.66

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-124

Amount of Each Receipt this Period

41.66

C.

Full Name (Last, First, Middle Initial)

Steven B. Kelmar

Mailing Address 5 Pembroke HI

City

Farmington

State

CT

Zip Code

06032-1461

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Fed & State Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-4

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)

483.32

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 132 / 281

(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)

Steven B. Kelmar

Mailing Address 5 Pembroke HI

City

Farmington

State

CT

Zip Code

06032-1461

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Fed & State Gov't Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-4

Amount of Each Receipt this Period

416.66

B.

Full Name (Last, First, Middle Initial)

Mark E. Kennedy

Mailing Address 19 Avery Rd

City

Bloomfield

State

CT

Zip Code

06002-4318

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Program Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-301

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mark E. Kennedy

Mailing Address 19 Avery Rd

City

Bloomfield

State

CT

Zip Code

06002-4318

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Program Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-300

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

466.66

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 133 / 281

(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)

Robert M. Kessler

Mailing Address 2 Carnoustie Cir

City

Bloomfield

State

CT

Zip Code

06002-2380

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-207

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Robert M. Kessler

Mailing Address 2 Carnoustie Cir

City

Bloomfield

State

CT

Zip Code

06002-2380

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-206

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Chekesha C. Kidd

Mailing Address 221 Trumbull St
Apt 1909

City

Hartford

State

CT

Zip Code

06103-1523

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Head of Student Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-14

Amount of Each Receipt this Period

100.00

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 134 / 281

(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)

James W. Kidd

Mailing Address 36 Eastwood Dr

City

East Hartland

State

CT

Zip Code

06027-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

CIO, International Businesses

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-304

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

James W. Kidd

Mailing Address 36 Eastwood Dr

City

East Hartland

State

CT

Zip Code

06027-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

CIO, International Businesses

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-303

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Clarence Carleton King

Mailing Address 13562 Braemar Dr

City

Dallas

State

TX

Zip Code

75234-5130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Natl Network Contract Svc Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-548

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 135 / 281

(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)

Clarence Carleton King

Mailing Address 13562 Braemar Dr

City

Dallas

State

TX

Zip Code

75234-5130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Natl Network Contract Svc Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-546

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Coleen H. Kivlahan

Mailing Address 10284 Long Hill Ct

City

Manassas

State

VA

Zip Code

20110-6161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicaid Med Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: 112010-198

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Coleen H. Kivlahan

Mailing Address 10284 Long Hill Ct

City

Manassas

State

VA

Zip Code

20110-6161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicaid Med Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-198

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

500.00

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 136 / 281

(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)

Charles H. Klippel

Mailing Address 120 Henley Way

City

Avon

State

CT

Zip Code

06001-4072

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 ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-246

Amount of Each Receipt this Period

416.66

B.

Full Name (Last, First, Middle Initial)

Charles H. Klippel

Mailing Address 120 Henley Way

City

Avon

State

CT

Zip Code

06001-4072

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 ▼

4999.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-245

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

James Kohan

Mailing Address 162 High Valley Dr

City

Canton

State

CT

Zip Code

06019-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Small Group / Individual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-51

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

933.32

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 137 / 281

(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)

James Kohan

Mailing Address 162 High Valley Dr

City

Canton

State

CT

Zip Code

06019-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Small Group / Individual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-51

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Deborah Koltenuk

Mailing Address 67 High Farms Rd

City

West Hartford

State

CT

Zip Code

06107-1544

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Benefits, HR Economics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

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

Transaction ID: 112010-342

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Deborah Koltenuk

Mailing Address 67 High Farms Rd

City

West Hartford

State

CT

Zip Code

06107-1544

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Benefits, HR Economics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-341

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

165.00

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 138 / 281

(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)

Ryan Koo

Mailing Address 2730 Sacramento St
Apt 1

City	State	Zip Code
San Francisco	CA	94115-2150

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
MMA Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-52

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Ryan Koo

Mailing Address 2730 Sacramento St
Apt 1

City	State	Zip Code
San Francisco	CA	94115-2150

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
MMA Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-52

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Brian J. Kost

Mailing Address 10 Barry Pl

City	State	Zip Code
Suffield	CT	06078-2249

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Business Unit Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-444

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

140.00

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 139 / 281

(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)

Brian J. Kost

Mailing Address 10 Barry Pl

City

Suffield

State

CT

Zip Code

06078-2249

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-442

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Jacqueline W. Kostenbader

Mailing Address 5530 Summit St

City

Whitehall

State

PA

Zip Code

18052-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-339

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Jacqueline W. Kostenbader

Mailing Address 5530 Summit St

City

Whitehall

State

PA

Zip Code

18052-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-338

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 140 / 281

(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)

Randall Krakauer

Mailing Address 29 Lorrie Ln

City

West Windsor

State

NJ

Zip Code

08550-5112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Natl Med Dir, Medicare Med Mgm

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-41

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Randall Krakauer

Mailing Address 29 Lorrie Ln

City

West Windsor

State

NJ

Zip Code

08550-5112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Natl Med Dir, Medicare Med Mgm

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-41

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

William I. Kramer

Mailing Address 45 Oakwood Dr

City

Dresher

State

PA

Zip Code

19025-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Dpty Chief Legal Health Deliv

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

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

Transaction ID: 112010-459

Amount of Each Receipt this Period

300.00

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: PAGE 141 / 281

(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)

William I. Kramer

Mailing Address 45 Oakwood Dr

City

Dresher

State

PA

Zip Code

19025-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Dpty Chief Legal Health Deliv

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-457

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Gregory E. Krause

Mailing Address 8550 W Mohawk Ln

City

Peoria

State

AZ

Zip Code

85382-1434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Application Development Mgr

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-199

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Gregory E. Krause

Mailing Address 8550 W Mohawk Ln

City

Peoria

State

AZ

Zip Code

85382-1434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Application Development Mgr

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-199

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

400.00

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 142 / 281

(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)

Martin R. Kreis

Mailing Address 1524 Thistlewood Dr

City

Desoto

State

TX

Zip Code

75115-7738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-527

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Martin R. Kreis

Mailing Address 1524 Thistlewood Dr

City

Desoto

State

TX

Zip Code

75115-7738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-525

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Robert Kropp

Mailing Address 301 Cordova Blvd NE

City

Saint Petersburg

State

FL

Zip Code

33704-3015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Reg. Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-65

Amount of Each Receipt this Period

25.00

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 143 / 281

(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)

Robert Kropp

Mailing Address 301 Cordova Blvd NE

City

Saint Petersburg

State

FL

Zip Code

33704-3015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Reg. Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-65

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Akshay Kumar

Mailing Address 34 Roberts Ln

City

West Hartford

State

CT

Zip Code

06107-1626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, Strategic Resource Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

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

Transaction ID: 112010-17

Amount of Each Receipt this Period

325.00

C.

Full Name (Last, First, Middle Initial)

Akshay Kumar

Mailing Address 34 Roberts Ln

City

West Hartford

State

CT

Zip Code

06107-1626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, Strategic Resource Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-17

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)

675.00

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 144 / 281

(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)

Rodney W. Kunkel

Mailing Address 79 High Valley Dr

City

Canton

State

CT

Zip Code

06019-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-44

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Rodney W. Kunkel

Mailing Address 79 High Valley Dr

City

Canton

State

CT

Zip Code

06019-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-44

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Raymond R. Kunstmanas

Mailing Address 602 Sancroft Ct

City

Katy

State

TX

Zip Code

77450-2129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-559

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 145 / 281

(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)

Raymond R. Kunstmanas

Mailing Address 602 Sancroft Ct

City

Katy

State

TX

Zip Code

77450-2129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-557

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Mark R. Laborde

Mailing Address 3604 Silvery Ln

City

Jacksonville

State

FL

Zip Code

32217-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-329

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mark R. Laborde

Mailing Address 3604 Silvery Ln

City

Jacksonville

State

FL

Zip Code

32217-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-328

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 146 / 281

(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 G. Lancia

Mailing Address 15238 Islevlew Dr

City

Chesterfield

State

MO

Zip Code

63017-7016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-111

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Paul G. Lancia

Mailing Address 15238 Islevlew Dr

City

Chesterfield

State

MO

Zip Code

63017-7016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-111

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Deborah Lantzy Talpos

Mailing Address 2265 Oak River Ct

City

Troy

State

MI

Zip Code

48098-5412

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-123

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 147 / 281

(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)

Deborah Lantzy Talpos

Mailing Address 2265 Oak River Ct

City

Troy

State

MI

Zip Code

48098-5412

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-123

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Jean Latorre

Mailing Address 18 Weathervane HI

City

Durham

State

CT

Zip Code

06422-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 112010-380

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Jean Latorre

Mailing Address 18 Weathervane HI

City

Durham

State

CT

Zip Code

06422-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-379

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

520.00

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 148 / 281

(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)

Ken R. Lautsch

Mailing Address PO Box 15928

City

Beverly Hills

State

CA

Zip Code

90209-1928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-170

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ken R. Lautsch

Mailing Address PO Box 15928

City

Beverly Hills

State

CA

Zip Code

90209-1928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-171

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

John A. Lawrence

Mailing Address 5 Warwick Rd

City

Flanders

State

NJ

Zip Code

07836-4402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head NE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-352

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 149 / 281

(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)

Deane Leader, JR.

Mailing Address 8313 Brookside Rd

City

Elkins Park

State

PA

Zip Code

19027-1903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Informatics Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: 112010-605

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Deane Leader, JR.

Mailing Address 8313 Brookside Rd

City

Elkins Park

State

PA

Zip Code

19027-1903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Informatics Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-603

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Andrew J. Lee

Mailing Address 139 Stonepost Rd

City

Glastonbury

State

CT

Zip Code

06033-4172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

COS to Office of the President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-92

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

275.00

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 150 / 281

(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)

Andrew J. Lee

Mailing Address 139 Stonepost Rd

City

Glastonbury

State

CT

Zip Code

06033-4172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

COS to Office of the President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-92

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Jarvis Leigh

Mailing Address 12238 Hickory Knoll Ct

City

Matthews

State

NC

Zip Code

28105-0804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

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

Transaction ID: 112010-74

Amount of Each Receipt this Period

120.00

C.

Full Name (Last, First, Middle Initial)

Jarvis Leigh

Mailing Address 12238 Hickory Knoll Ct

City

Matthews

State

NC

Zip Code

28105-0804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-74

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

315.00

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 151 / 281

(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)

Jody Osko Lewis

Mailing Address 8 Dodge Dr

City

West Hartford

State

CT

Zip Code

06107-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: 112010-335

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Jody Osko Lewis

Mailing Address 8 Dodge Dr

City

West Hartford

State

CT

Zip Code

06107-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-334

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Michael S. Lichtenberger

Mailing Address 9 Gary Ln

City

Colchester

State

CT

Zip Code

06415-1781

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Financial Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-150

Amount of Each Receipt this Period

25.00

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 152 / 281

(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)

Michael S. Lichtenberger

Mailing Address 9 Gary Ln

City

Colchester

State

CT

Zip Code

06415-1781

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Financial Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-151

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Catherine F. Liston

Mailing Address 902 Sligo Rd

City

North Yarmouth

State

ME

Zip Code

04097-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd,GI Disability Benefits Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-67

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Catherine F. Liston

Mailing Address 902 Sligo Rd

City

North Yarmouth

State

ME

Zip Code

04097-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd,GI Disability Benefits Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-67

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: PAGE 153 / 281

(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)

Steven G. Logan

Mailing Address 15 Gray Rock Ln

City

Chappaqua

State

NY

Zip Code

10514-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head NE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-290

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Steven G. Logan

Mailing Address 15 Gray Rock Ln

City

Chappaqua

State

NY

Zip Code

10514-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head NE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-289

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Toni K. Lombardi

Mailing Address 1374 E Ellery Ave

City

Fresno

State

CA

Zip Code

93710-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-231

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

325.00

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 154 / 281

(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)

Toni K. Lombardi

Mailing Address 1374 E Ellery Ave

City

Fresno

State

CA

Zip Code

93710-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Consultant

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-230

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Rosse Mary Lopez

Mailing Address 75 Cobane Ter

City

West Orange

State

NJ

Zip Code

07052-3932

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Business Analyst

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-538

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Rosse Mary Lopez

Mailing Address 75 Cobane Ter

City

West Orange

State

NJ

Zip Code

07052-3932

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Business Analyst

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-536

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

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(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)

Loretta A. Lorenzen

Mailing Address 1403 W Decorah Rd

City

West Bend

State

WI

Zip Code

53095-3701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Network Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: 112010-172

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Christopher E. Loughlin

Mailing Address 1780 Forest Creek Dr

City

Blue Bell

State

PA

Zip Code

19422-3654

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Application Development Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-435

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Christopher E. Loughlin

Mailing Address 1780 Forest Creek Dr

City

Blue Bell

State

PA

Zip Code

19422-3654

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Application Development Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-433

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

140.00

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

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(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)

Raymond G. Ludwig

Mailing Address 1524 Friends Ln

City

Maple Glen

State

PA

Zip Code

19002-2812

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-141

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Raymond G. Ludwig

Mailing Address 1524 Friends Ln

City

Maple Glen

State

PA

Zip Code

19002-2812

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-142

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Kirk H. Lusk

Mailing Address 171 Cold Spring Rd

City

Avon

State

CT

Zip Code

06001-4057

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Unit Fin Officer, Int'l

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-12

Amount of Each Receipt this Period

100.00

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 157 / 281

(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)

Kirk H. Lusk

Mailing Address 171 Cold Spring Rd

City

Avon

State

CT

Zip Code

06001-4057

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Unit Fin Officer, Int'l

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-12

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Kimberly Lyman

Mailing Address 2 Cherryfield Dr

City

West Hartford

State

CT

Zip Code

06107-3310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-47

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Kimberly Lyman

Mailing Address 2 Cherryfield Dr

City

West Hartford

State

CT

Zip Code

06107-3310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-47

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

140.00

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 158 / 281

(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)

Stuart F. MacDonald

Mailing Address 1804 Lexington Dr

City

State

Zip Code

Troy

MI

48084-5713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

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

Transaction ID: 112010-585

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Stuart F. MacDonald

Mailing Address 1804 Lexington Dr

City

State

Zip Code

Troy

MI

48084-5713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-583

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Shawn M. MacPherson

Mailing Address 131 Village Way

City

State

Zip Code

Chalfont

PA

18914-1840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Application Tech Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-462

Amount of Each Receipt this Period

25.00

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
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(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)

Shawn M. MacPherson

Mailing Address 131 Village Way

City

Chalfont

State

PA

Zip Code

18914-1840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Application Tech Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-460

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Patricia A. MacRae

Mailing Address 14 Belcher Rd

City

Wethersfield

State

CT

Zip Code

06109-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HlthCare Rfrm Sr Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-340

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Patricia A. MacRae

Mailing Address 14 Belcher Rd

City

Wethersfield

State

CT

Zip Code

06109-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HlthCare Rfrm Sr Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-339

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

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(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)

Alan K. Maesaka

Mailing Address 25 Lowrys Ln

City

Bryn Mawr

State

PA

Zip Code

19010-1402

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-497

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Alan K. Maesaka

Mailing Address 25 Lowrys Ln

City

Bryn Mawr

State

PA

Zip Code

19010-1402

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-495

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Anthony Magliano

Mailing Address 841 Colridge Rd

City

Wantagh

State

NY

Zip Code

11793-1548

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.Occupation
Business Unit Service Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-533

Amount of Each Receipt this Period

25.00

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 161 / 281

(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)

Anthony Magliano

Mailing Address 841 Colridge Rd

City

Wantagh

State

NY

Zip Code

11793-1548

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Service Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-531

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Sibongile Magubane

Mailing Address 54 Goodwin Cir

City

Hartford

State

CT

Zip Code

06105-5206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

ADO Program Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1839.96

Date of Receipt

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

Transaction ID: 112010-240

Amount of Each Receipt this Period

153.33

C.

Full Name (Last, First, Middle Initial)

Sibongile Magubane

Mailing Address 54 Goodwin Cir

City

Hartford

State

CT

Zip Code

06105-5206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

ADO Program Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1839.96

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-239

Amount of Each Receipt this Period

153.33

SUBTOTAL of Receipts This Page (optional)

331.66

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 162 / 281

(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)

Stephen Mahoney

Mailing Address 14 Tolland Farms Rd

City

Tolland

State

CT

Zip Code

06084-3231

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

Bus Unit Finance Officer, NA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-27

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Stephen Mahoney

Mailing Address 14 Tolland Farms Rd

City

Tolland

State

CT

Zip Code

06084-3231

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

Bus Unit Finance Officer, NA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-27

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Barbara Mann

Mailing Address 125 Cypress Dr

City

East Windsor

State

NJ

Zip Code

08520-2315

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

Senior Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 112010-549

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

115.00

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 163 / 281

(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)

Barbara Mann

Mailing Address 125 Cypress Dr

City

East Windsor

State

NJ

Zip Code

08520-2315

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-547

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Janet S. Mann

Mailing Address 10 Deerfield Trce

City

Burlington

State

CT

Zip Code

06013-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Regulatory Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-557

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Janet S. Mann

Mailing Address 10 Deerfield Trce

City

Burlington

State

CT

Zip Code

06013-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Regulatory Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-555

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

115.00

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 164 / 281

(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)

Paul E. Marchetti

Mailing Address 240 Putting Green Rd

City

Trumbull

State

CT

Zip Code

06611-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, National Care Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-107

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Paul E. Marchetti

Mailing Address 240 Putting Green Rd

City

Trumbull

State

CT

Zip Code

06611-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, National Care Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-107

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Jorge L. Marimon

Mailing Address 130 Founders Rd

City

Glastonbury

State

CT

Zip Code

06033-3204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Lead Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-79

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

325.00

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 165 / 281

(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)

Jorge L. Marimon

Mailing Address 130 Founders Rd

City

Glastonbury

State

CT

Zip Code

06033-3204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Lead Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-79

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Paul Marlowe

Mailing Address 124 Edgewood Dr

City

South Windsor

State

CT

Zip Code

06074-3409

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-53

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Paul Marlowe

Mailing Address 124 Edgewood Dr

City

South Windsor

State

CT

Zip Code

06074-3409

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-53

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 166 / 281

(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)

Raymond Marra

Mailing Address 72 Cornerstone Dr

City

South Windsor

State

CT

Zip Code

06074-2399

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Segment Head Actuary, NA

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: 112010-45

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Raymond Marra

Mailing Address 72 Cornerstone Dr

City

South Windsor

State

CT

Zip Code

06074-2399

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Segment Head Actuary, NA

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-45

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Brian P. Marsella

Mailing Address 1801 W Addison St
Apt 4W

City

Chicago

State

IL

Zip Code

60613-4284

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales & Svc

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 112010-81

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

330.00

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 167 / 281

(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)

Brian P. Marsella

Mailing Address 1801 W Addison St
Apt 4W

City	State	Zip Code
Chicago	IL	60613-4284

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
NAT Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-81

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Michael L. Marshall

Mailing Address 114 Rockledge Dr

City	State	Zip Code
South Windsor	CT	06074-1568

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Head of Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-269

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Michael L. Marshall

Mailing Address 114 Rockledge Dr

City	State	Zip Code
South Windsor	CT	06074-1568

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Head of Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-268

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 168 / 281

(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)

Kathleen L. Martella

Mailing Address 750 Lemon St

City

Menlo Park

State

CA

Zip Code

94025-6109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-271

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Kathleen L. Martella

Mailing Address 750 Lemon St

City

Menlo Park

State

CA

Zip Code

94025-6109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-270

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Gregory S. Martino

Mailing Address 162 Timber Ridge Rd

City

Hummelstown

State

PA

Zip Code

17036-7444

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-580

Amount of Each Receipt this Period

75.00

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 169 / 281

(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)

Gregory S. Martino

Mailing Address 162 Timber Ridge Rd

City

Hummelstown

State

PA

Zip Code

17036-7444

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-578

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Raymond A. Maskell

Mailing Address 14 Clark Rd

City

Lyme

State

CT

Zip Code

06371-3007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Lead Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

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

Transaction ID: 112010-168

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Raymond A. Maskell

Mailing Address 14 Clark Rd

City

Lyme

State

CT

Zip Code

06371-3007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Lead Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-169

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 170 / 281

(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)

Louis Mazzucca

Mailing Address 128 Jonathan Dr

City

North Wales

State

PA

Zip Code

19454-1451

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Application Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-599

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Louis Mazzucca

Mailing Address 128 Jonathan Dr

City

North Wales

State

PA

Zip Code

19454-1451

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Application Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-597

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Grant Mc Millon

Mailing Address 4616 Maple Hill Dr

City

Fort Worth

State

TX

Zip Code

76123-4640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-142

Amount of Each Receipt this Period

25.00

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 171 / 281

(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)

Grant Mc Millon

Mailing Address 4616 Maple Hill Dr

City

Fort Worth

State

TX

Zip Code

76123-4640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-143

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Thomas McAteer

Mailing Address 54 Cedar Point Dr

City

West Islip

State

NY

Zip Code

11795-5014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medicaid Region Head - East

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 112010-212

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Thomas McAteer

Mailing Address 54 Cedar Point Dr

City

West Islip

State

NY

Zip Code

11795-5014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medicaid Region Head - East

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-211

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

525.00

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 172 / 281

(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)

Maureen A. McCabe

Mailing Address 33 Oak Ridge Dr

City

Berlin

State

CT

Zip Code

06037-3709

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief of Staff, AIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-253

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Maureen A. McCabe

Mailing Address 33 Oak Ridge Dr

City

Berlin

State

CT

Zip Code

06037-3709

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief of Staff, AIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-252

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Meg A. McCabe

Mailing Address 191 Walden St

City

West Hartford

State

CT

Zip Code

06107-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, Consumer Mktg & Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3667.56

Date of Receipt

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

Transaction ID: 112010-61

Amount of Each Receipt this Period

305.63

SUBTOTAL of Receipts This Page (optional)

355.63

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 173 / 281

(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)

Meg A. McCabe

Mailing Address 191 Walden St

City

West Hartford

State

CT

Zip Code

06107-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, Consumer Mktg & Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3667.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-61

Amount of Each Receipt this Period

305.63

B.

Full Name (Last, First, Middle Initial)

Margaret McCarthy

Mailing Address PO Box 641

City

Chatham

State

MA

Zip Code

02633-0641

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

EVP, Operations & Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-48

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Margaret McCarthy

Mailing Address PO Box 641

City

Chatham

State

MA

Zip Code

02633-0641

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

EVP, Operations & Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-48

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)

1138.95

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 174 / 281

(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)

Frank G. McCauley

Mailing Address 25 Greystone

City

Collinsville

State

CT

Zip Code

06019-3715

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

Hd, Local Employer & Cnsmr Bus

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

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

Transaction ID: 112010-400

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Frank G. McCauley

Mailing Address 25 Greystone

City

Collinsville

State

CT

Zip Code

06019-3715

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

Hd, Local Employer & Cnsmr Bus

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-399

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Peter R. McClung

Mailing Address 552 Partridge Ct

City

Blue Bell

State

PA

Zip Code

19422-1620

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

NAT Senior Account Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-576

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

875.00

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 175 / 281

(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)

Peter R. McClung

Mailing Address 552 Partridge Ct

City

Blue Bell

State

PA

Zip Code

19422-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Senior Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-574

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Karen McClure

Mailing Address 28927 Allman St

City

Agoura Hills

State

CA

Zip Code

91301-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Manager, Product Mgmt/Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-42

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Karen McClure

Mailing Address 28927 Allman St

City

Agoura Hills

State

CA

Zip Code

91301-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Manager, Product Mgmt/Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-42

Amount of Each Receipt this Period

25.00

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 176 / 281

(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 T. McGinn

Mailing Address 315 Country Ln

City

Phoenixville

State

PA

Zip Code

19460-1713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: 112010-383

Amount of Each Receipt this Period

62.50

B.

Full Name (Last, First, Middle Initial)

Patrick T. McGinn

Mailing Address 315 Country Ln

City

Phoenixville

State

PA

Zip Code

19460-1713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-382

Amount of Each Receipt this Period

62.50

C.

Full Name (Last, First, Middle Initial)

Colleen McHugh

Mailing Address 102 Country Way

City

Madison

State

CT

Zip Code

06443-1719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Natl Hd of Sales, Grp Medicare

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-278

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 177 / 281

(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)

Colleen McHugh

Mailing Address 102 Country Way

City

Madison

State

CT

Zip Code

06443-1719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Natl Hd of Sales, Grp Medicare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-277

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Robert March Mead

Mailing Address 3891 Congress St

City

Fairfield

State

CT

Zip Code

06824-2078

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Mktng, Product & Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-166

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Robert March Mead

Mailing Address 3891 Congress St

City

Fairfield

State

CT

Zip Code

06824-2078

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Mktng, Product & Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-167

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)

858.32

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 178 / 281

(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)

Mark D. Meador

Mailing Address 15 St Michaels Ct

City

Avon

State

CT

Zip Code

06001-3187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-529

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mark D. Meador

Mailing Address 15 St Michaels Ct

City

Avon

State

CT

Zip Code

06001-3187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-527

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Maria S. Mendez

Mailing Address 2512 Edgefield Trl

City

Mansfield

State

TX

Zip Code

76063-3740

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Marketing Strategy Unit Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

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

Transaction ID: 112010-132

Amount of Each Receipt this Period

12.50

SUBTOTAL of Receipts This Page (optional)

62.50

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 179 / 281

(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)

Maria S. Mendez

Mailing Address 2512 Edgefield Trl

City

Mansfield

State

TX

Zip Code

76063-3740

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Marketing Strategy Unit Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-132

Amount of Each Receipt this Period

12.50

B.

Full Name (Last, First, Middle Initial)

Shannon P. Meroney

Mailing Address 6901 Glen Ridge Dr

City

Austin

State

TX

Zip Code

78731-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-164

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Shannon P. Meroney

Mailing Address 6901 Glen Ridge Dr

City

Austin

State

TX

Zip Code

78731-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-165

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

212.50

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 180 / 281

(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)

Michael A. Mesoras

Mailing Address 1335 Princeton Pl

City

Wexford

State

PA

Zip Code

15090-8707

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

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

Transaction ID: 112010-458

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Michael A. Mesoras

Mailing Address 1335 Princeton Pl

City

Wexford

State

PA

Zip Code

15090-8707

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-456

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Diana C. Meyer

Mailing Address 2350 Veteran Ave

City

Los Angeles

State

CA

Zip Code

90064-2108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-82

Amount of Each Receipt this Period

8.33

SUBTOTAL of Receipts This Page (optional)

92.33

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 181 / 281

(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)

Gregory A. Miller

Mailing Address 1555 9th St

City

Manhattan Beach

State

CA

Zip Code

90266-6126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-116

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Gregory A. Miller

Mailing Address 1555 9th St

City

Manhattan Beach

State

CA

Zip Code

90266-6126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-116

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey T. Miller

Mailing Address 12131 Ashaway Ln

City

Frisco

State

TX

Zip Code

75035-6998

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-314

Amount of Each Receipt this Period

20.00

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 182 / 281

(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)

Jeffrey T. Miller

Mailing Address 12131 Ashaway Ln

City

Frisco

State

TX

Zip Code

75035-6998

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-313

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Bret L. Minarik

Mailing Address 1516 Marco Dr

City

Pasadena

State

MD

Zip Code

21122-4838

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

FRAP Sr. Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: 112010-200

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Christopher Montross

Mailing Address 250 Crest St

City

Wethersfield

State

CT

Zip Code

06109-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-309

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: PAGE 183 / 281

(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)

Christopher Montross

Mailing Address 250 Crest St

City

Wethersfield

State

CT

Zip Code

06109-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-308

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Kay D. Mooney

Mailing Address 33 Fox Ln

City

Durham

State

CT

Zip Code

06422-3221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chf of Staff, Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: 112010-345

Amount of Each Receipt this Period

175.00

C.

Full Name (Last, First, Middle Initial)

Kay D. Mooney

Mailing Address 33 Fox Ln

City

Durham

State

CT

Zip Code

06422-3221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chf of Staff, Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-344

Amount of Each Receipt this Period

175.00

SUBTOTAL of Receipts This Page (optional)

375.00

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 184 / 281

(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)

Michael E. Morris

Mailing Address 1 Morgan Dr

City

Danvers

State

MA

Zip Code

01923-1753

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-466

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Michael E. Morris

Mailing Address 1 Morgan Dr

City

Danvers

State

MA

Zip Code

01923-1753

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-464

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Matthew S. Morrow

Mailing Address 2725 NW 168th Ter

City

Edmond

State

OK

Zip Code

73012-8992

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Technical Mgr, Prod Mgmt / Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: 112010-406

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 185 / 281

(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)

Gail A. Mueller

Mailing Address 309 Box Mountain Dr

City

Vernon

State

CT

Zip Code

06066-6310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

DB Administrator Sr Tech Spec

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-358

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Gail A. Mueller

Mailing Address 309 Box Mountain Dr

City

Vernon

State

CT

Zip Code

06066-6310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

DB Administrator Sr Tech Spec

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-357

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Dawn Muller

Mailing Address 19 Sea Is

City

Glastonbury

State

CT

Zip Code

06033-1475

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 ▼

300.00

Date of Receipt

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

Transaction ID: 112010-250

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: PAGE 186 / 281

(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)

Dawn Muller

Mailing Address 19 Sea Is

City

Glastonbury

State

CT

Zip Code

06033-1475

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-249

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Louise Dufour Murphy

Mailing Address 5658 Charlestown Dr

City

Dallas

State

TX

Zip Code

75230-1730

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Behavioral Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-83

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Louise Dufour Murphy

Mailing Address 5658 Charlestown Dr

City

Dallas

State

TX

Zip Code

75230-1730

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Behavioral Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-83

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 187 / 281

(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)

Thomas C. Nasby

Mailing Address 12857 Vickers Lake Ct

City

Jacksonville

State

FL

Zip Code

32224-8434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-109

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Thomas C. Nasby

Mailing Address 12857 Vickers Lake Ct

City

Jacksonville

State

FL

Zip Code

32224-8434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Market Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-109

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

John E. Neugebauer

Mailing Address 3150 Methacton Ave

City

Trooper

State

PA

Zip Code

19403-1031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Dpty Chief Legal Offcr Litigat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 112010-470

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

450.00

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 188 / 281

(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)

John E. Neugebauer

Mailing Address 3150 Methacton Ave

City

Trooper

State

PA

Zip Code

19403-1031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Dpty Chief Legal Offcr Litigat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-468

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Chiaw Eei Ngibson

Mailing Address 10 Deepwood Ln

City

West Hartford

State

CT

Zip Code

06107-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Special Projects Intgrtn PMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2283.33

Date of Receipt

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

Transaction ID: 112010-365

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Chiaw Eei Ngibson

Mailing Address 10 Deepwood Ln

City

West Hartford

State

CT

Zip Code

06107-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Special Projects Intgrtn PMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2283.33

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-364

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)

533.33

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 189 / 281

(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. Nicholls

Mailing Address 745 Medinah Dr

City

Winston Salem

State

NC

Zip Code

27107-6027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2650.00

Date of Receipt

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

Transaction ID: 112010-167

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Robert J. Nicholls

Mailing Address 745 Medinah Dr

City

Winston Salem

State

NC

Zip Code

27107-6027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-168

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Franklin C. Norman

Mailing Address 277 Cider Brook Rd

City

Avon

State

CT

Zip Code

06001-2849

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, AHM Strat, Bus Dev & Cnslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4980.00

Date of Receipt

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

Transaction ID: 112010-125

Amount of Each Receipt this Period

415.00

SUBTOTAL of Receipts This Page (optional)

915.00

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 190 / 281

(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)

Franklin C. Norman

Mailing Address 277 Cider Brook Rd

City

Avon

State

CT

Zip Code

06001-2849

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, AHM Strat, Bus Dev & Cnslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4980.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-125

Amount of Each Receipt this Period

415.00

B.

Full Name (Last, First, Middle Initial)

Felicia F. Norwood

Mailing Address 15 W 15th St

City

Chicago

State

IL

Zip Code

60605-2723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Mid America

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-404

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Felicia F. Norwood

Mailing Address 15 W 15th St

City

Chicago

State

IL

Zip Code

60605-2723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Mid America

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-403

Amount of Each Receipt this Period

416.66

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 / 281

(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)

Merry L. Noss

Mailing Address PO Box 7970

City

Horseshoe Bay

State

TX

Zip Code

78657-7970

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Manager, Product Mgmt/Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-424

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Merry L. Noss

Mailing Address PO Box 7970

City

Horseshoe Bay

State

TX

Zip Code

78657-7970

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Manager, Product Mgmt/Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-422

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

David O'Brien

Mailing Address 161 Weir St

City

Glastonbury

State

CT

Zip Code

06033-2711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Technology Support Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-399

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: PAGE 192 / 281

(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)

David O'Brien

Mailing Address 161 Weir St

City

Glastonbury

State

CT

Zip Code

06033-2711

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

Technology Support Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-398

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Alfred Brian O'Shields

Mailing Address 2046 Weddington Lake Dr

City

Weddington

State

NC

Zip Code

28104-8743

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-80

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Alfred Brian O'Shields

Mailing Address 2046 Weddington Lake Dr

City

Weddington

State

NC

Zip Code

28104-8743

FEC ID number of contributing
federal political committee.**C**Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-80

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: PAGE 193 / 281

(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)

Peter R. Oades

Mailing Address 40 Hunters Rdg

City

Rocky Hill

State

CT

Zip Code

06067-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Fixed Income

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-338

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Peter R. Oades

Mailing Address 40 Hunters Rdg

City

Rocky Hill

State

CT

Zip Code

06067-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Fixed Income

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-337

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Lora A. Oldham

Mailing Address 20039 E Brightway Dr

City

Mokena

State

IL

Zip Code

60448-1404

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-158

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 194 / 281

(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)

Lora A. Oldham

Mailing Address 20039 E Brightway Dr

City

Mokena

State

IL

Zip Code

60448-1404

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Network Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-159

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Bobbi L. Ortiz

Mailing Address 133 Mountain Blvd

City

Wernersville

State

PA

Zip Code

19565-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Customer Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-241

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Bobbi L. Ortiz

Mailing Address 133 Mountain Blvd

City

Wernersville

State

PA

Zip Code

19565-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Customer Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-240

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: PAGE 195 / 281

(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)

Debra S. Osborn

Mailing Address 1245 Farmington Ave
228

City State Zip Code
West Hartford CT 06107-2667

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-401

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Debra S. Osborn

Mailing Address 1245 Farmington Ave
228

City State Zip Code
West Hartford CT 06107-2667

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-400

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Karen Ott

Mailing Address 32 Clover Hill Pl

City State Zip Code
Kensington CT 06037-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Technology Support Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-289

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 196 / 281

(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)

Karen Ott

Mailing Address 32 Clover Hill Pl

City

Kensington

State

CT

Zip Code

06037-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Technology Support Advisor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-288

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Donna R. Otten

Mailing Address 105 Country Club Rd

City

Bolton

State

CT

Zip Code

06043-7460

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Aetna Global Benefits

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-265

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Donna R. Otten

Mailing Address 105 Country Club Rd

City

Bolton

State

CT

Zip Code

06043-7460

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Aetna Global Benefits

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-264

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 197 / 281

(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)

Martha Oxford

Mailing Address 1113 Edgewood Ln

City

Fort Lee

State

NJ

Zip Code

07024-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-287

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Martha Oxford

Mailing Address 1113 Edgewood Ln

City

Fort Lee

State

NJ

Zip Code

07024-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-286

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Rajan Parmeswar

Mailing Address 7 Evans Dr

City

Simsbury

State

CT

Zip Code

06070-3011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Controller & Chief Acct Offcr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2650.00

Date of Receipt

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

Transaction ID: 112010-8

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 198 / 281

(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)

Rajan Parmeswar

Mailing Address 7 Evans Dr

City

Simsbury

State

CT

Zip Code

06070-3011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Controller & Chief Acct Offcr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-8

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

John E. Pelletier

Mailing Address 116 Camp Ave

City

Newington

State

CT

Zip Code

06111-1904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Application Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-296

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

John E. Pelletier

Mailing Address 116 Camp Ave

City

Newington

State

CT

Zip Code

06111-1904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Application Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-295

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 199 / 281

(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)

Michael Joseph Phillips

Mailing Address 88 Kielwasser Rd

City

New Preston

State

CT

Zip Code

06777-1813

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Adjacencies & Innov, NA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-181

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Michael Joseph Phillips

Mailing Address 88 Kielwasser Rd

City

New Preston

State

CT

Zip Code

06777-1813

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd Adjacencies & Innov, NA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-181

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Andrew J. Picken

Mailing Address 216 NW Despain Ave

City

Pendleton

State

OR

Zip Code

97801-1627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-117

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 200 / 281

(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)

Andrew J. Picken

Mailing Address 216 NW Despain Ave

City

Pendleton

State

OR

Zip Code

97801-1627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-117

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Joyce M. Pillion

Mailing Address 85 Scarborough Ln

City

Middletown

State

CT

Zip Code

06457-7552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

QA Senior Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.16

Date of Receipt

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

Transaction ID: 112010-263

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Joyce M. Pillion

Mailing Address 85 Scarborough Ln

City

Middletown

State

CT

Zip Code

06457-7552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

QA Senior Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.16

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-262

Amount of Each Receipt this Period

4.16

SUBTOTAL of Receipts This Page (optional)

129.16

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 201 / 281

(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)

Thomas L. Potter

Mailing Address 25 Sunset Hill Rd

City

Simsbury

State

CT

Zip Code

06070-3050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-32

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Thomas L. Potter

Mailing Address 25 Sunset Hill Rd

City

Simsbury

State

CT

Zip Code

06070-3050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-32

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

John C. Price

Mailing Address 4285 Homestead Ridge Dr

City

Cumming

State

GA

Zip Code

30041-5678

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

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

Transaction ID: 112010-351

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 202 / 281

(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)

John C. Price

Mailing Address 4285 Homestead Ridge Dr

City

Cumming

State

GA

Zip Code

30041-5678

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-350

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Michele Purnell

Mailing Address 907 Llanfair Rd

City

Ambler

State

PA

Zip Code

19002-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-452

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Michele Purnell

Mailing Address 907 Llanfair Rd

City

Ambler

State

PA

Zip Code

19002-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-450

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 203 / 281

(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)

David A. Queller

Mailing Address 50 Asheworth Ct NW

City

Atlanta

State

GA

Zip Code

30327-1531

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Southeast

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-562

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

David A. Queller

Mailing Address 50 Asheworth Ct NW

City

Atlanta

State

GA

Zip Code

30327-1531

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head Southeast

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-560

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Alfred P. Quirk, JR.

Mailing Address 29 Pembroke HI

City

Farmington

State

CT

Zip Code

06032-1461

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Finance and Treasurer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-276

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)

616.66

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 204 / 281

(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)

Alfred P. Quirk, JR.

Mailing Address 29 Pembroke HI

City

Farmington

State

CT

Zip Code

06032-1461

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Finance and Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-275

Amount of Each Receipt this Period

416.66

B.

Full Name (Last, First, Middle Initial)

Farrukh Rashid

Mailing Address 20230 Seneca Sq

City

Ashburn

State

VA

Zip Code

20147-5067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Technology Support Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: 112010-185

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Farrukh Rashid

Mailing Address 20230 Seneca Sq

City

Ashburn

State

VA

Zip Code

20147-5067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Technology Support Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-185

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

486.66

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 205 / 281

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☒ 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)

Carol Anne Rawlins

Mailing Address 190 Astoria Ave

City

Bridgeport

State

CT

Zip Code

06604-1727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sales Executive, Govt & Labor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-227

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Carol Anne Rawlins

Mailing Address 190 Astoria Ave

City

Bridgeport

State

CT

Zip Code

06604-1727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sales Executive, Govt & Labor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-226

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Wayne S. Rawlins

Mailing Address 7 Upper Heatherwood

City

Cromwell

State

CT

Zip Code

06416-2709

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

National Medical Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-438

Amount of Each Receipt this Period

100.00

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 206 / 281

(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)

Wayne S. Rawlins

Mailing Address 7 Upper Heatherwood

City

Cromwell

State

CT

Zip Code

06416-2709

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

National Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-436

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

James Reid

Mailing Address 14 Beach Rd

City

Monmouth Beach

State

NJ

Zip Code

07750-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Voluntary & DTC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-457

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

James Reid

Mailing Address 14 Beach Rd

City

Monmouth Beach

State

NJ

Zip Code

07750-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Voluntary & DTC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-455

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 207 / 281

(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)

Lonny Reisman

Mailing Address 7 Black Rock Rd

City

Glen Head

State

NY

Zip Code

11545-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-122

Amount of Each Receipt this Period

416.66

B.

Full Name (Last, First, Middle Initial)

Lonny Reisman

Mailing Address 7 Black Rock Rd

City

Glen Head

State

NY

Zip Code

11545-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-122

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Jane S. Richardson

Mailing Address 4051 Tartan Ln

City

Houston

State

TX

Zip Code

77025-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Clinical Account Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-158

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

883.32

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 208 / 281

(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)

Hoyland H. Ricks

Mailing Address 1080 Peachtree St NE
Unit 902

City State Zip Code
Atlanta GA 30309-6806

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-500

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Hoyland H. Ricks

Mailing Address 1080 Peachtree St NE
Unit 902

City State Zip Code
Atlanta GA 30309-6806

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-498

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Christine M. Riedl

Mailing Address 151 Washington Ct

City State Zip Code
Westmont IL 60559-1356

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 ▼

300.00

Date of Receipt

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

Transaction ID: 112010-330

Amount of Each Receipt this Period

25.00

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 209 / 281

(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)

Christine M. Riedl

Mailing Address 151 Washington Ct

City

Westmont

State

IL

Zip Code

60559-1356

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 ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-329

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Harry P. Ripa, JR.

Mailing Address 1 Haviland Rd

City

Bloomfield

State

CT

Zip Code

06002-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Manager, Product Mgmt/Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-610

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Harry P. Ripa, JR.

Mailing Address 1 Haviland Rd

City

Bloomfield

State

CT

Zip Code

06002-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr Manager, Product Mgmt/Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-608

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: PAGE 210 / 281

(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)

Michael K. Roberson

Mailing Address 38 N Morning Cloud Cir

City

The Woodlands

State

TX

Zip Code

77381-6164

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-512

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Michael K. Roberson

Mailing Address 38 N Morning Cloud Cir

City

The Woodlands

State

TX

Zip Code

77381-6164

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

NAT Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-510

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Michele A. Roddenberry

Mailing Address 32098 Camino Nunez

City

Temecula

State

CA

Zip Code

92592-6342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-391

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 211 / 281

(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)

Michele A. Roddenberry

Mailing Address 32098 Camino Nunez

City

Temecula

State

CA

Zip Code

92592-6342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-390

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Alison Rogers-McCoy

Mailing Address 48 Mountain View Dr

City

West Hartford

State

CT

Zip Code

06117-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HR BP Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-156

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Alison Rogers-McCoy

Mailing Address 48 Mountain View Dr

City

West Hartford

State

CT

Zip Code

06117-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HR BP Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-157

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: PAGE 212 / 281

(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)

Anne M. Romer

Mailing Address 1725 E Quail Ave

City

Phoenix

State

AZ

Zip Code

85024-5609

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Technical Infrastructure Mngr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-202

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Anne M. Romer

Mailing Address 1725 E Quail Ave

City

Phoenix

State

AZ

Zip Code

85024-5609

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Technical Infrastructure Mngr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-201

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Jon F. Rooney

Mailing Address 4 Fleetwood Dr

City

Simsbury

State

CT

Zip Code

06070-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Managing Director, Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: 112010-165

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: PAGE 213 / 281

(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)

Jon F. Rooney

Mailing Address 4 Fleetwood Dr

City

Simsbury

State

CT

Zip Code

06070-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Managing Director, Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-166

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Anne P. Rote

Mailing Address 5519 Purdue Ave

City

Dallas

State

TX

Zip Code

75209-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr. Mgr, Medicaid Health Plan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-373

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Anne P. Rote

Mailing Address 5519 Purdue Ave

City

Dallas

State

TX

Zip Code

75209-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr. Mgr, Medicaid Health Plan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-372

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 214 / 281

(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)

Jason Rottman

Mailing Address 122 Goldsborough St

City

Easton

State

MD

Zip Code

21601-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Manager Medicaid Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: 112010-203

Amount of Each Receipt this Period

62.50

B.

Full Name (Last, First, Middle Initial)

Jason Rottman

Mailing Address 122 Goldsborough St

City

Easton

State

MD

Zip Code

21601-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Manager Medicaid Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-202

Amount of Each Receipt this Period

62.50

C.

Full Name (Last, First, Middle Initial)

Brian Rudi

Mailing Address 1816 Candlewyck Ln

City

Green Lane

State

PA

Zip Code

18054-2047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Assistant Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-525

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

145.00

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 215 / 281

(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)

Brian Rudi

Mailing Address 1816 Candlewyck Ln

City

Green Lane

State

PA

Zip Code

18054-2047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Assistant Actuary

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-523

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey L. Saeger

Mailing Address 3 W Simsbury Rd

City

Canton

State

CT

Zip Code

06019-5021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-210

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey L. Saeger

Mailing Address 3 W Simsbury Rd

City

Canton

State

CT

Zip Code

06019-5021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-209

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 216 / 281

(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, JR.

Mailing Address 7419 Colgate Ave

City

Dallas

State

TX

Zip Code

75225-4508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

National Accounts Regional Hd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-571

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Ross W. Sanders, JR.

Mailing Address 7419 Colgate Ave

City

Dallas

State

TX

Zip Code

75225-4508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

National Accounts Regional Hd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-569

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Cecily Ana Santolini

Mailing Address 42 Janelle Dr

City

Agawam

State

MA

Zip Code

01001-2718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Business Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-29

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 217 / 281

(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)

Cecily Ana Santolini

Mailing Address 42 Janelle Dr

City

Agawam

State

MA

Zip Code

01001-2718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Business Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-29

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Borislava Sardak

Mailing Address 44 Summer St

City

Sudbury

State

MA

Zip Code

01776-2538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Application Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-86

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Borislava Sardak

Mailing Address 44 Summer St

City

Sudbury

State

MA

Zip Code

01776-2538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Application Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-86

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 218 / 281

(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)

Gregory D. Saul

Mailing Address 820 Firethorn Cir

City

Dresher

State

PA

Zip Code

19025-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-440

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Gregory D. Saul

Mailing Address 820 Firethorn Cir

City

Dresher

State

PA

Zip Code

19025-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-438

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Molly Anne Schild

Mailing Address 2130 P St NW
Apt 1001

City

Washington

State

DC

Zip Code

20037-1064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-15

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 219 / 281

(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)

Joseph E. Schmidt

Mailing Address 1384 Devon Rd

City

Warminster

State

PA

Zip Code

18974-3754

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Underwriting Unit Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-486

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Joseph E. Schmidt

Mailing Address 1384 Devon Rd

City

Warminster

State

PA

Zip Code

18974-3754

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Underwriting Unit Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-484

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mark Wesley Schmidt

Mailing Address 190 Berkeley Ridge Dr

City

Columbia

State

SC

Zip Code

29229-7579

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: 112010-182

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 220 / 281

(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)

Mark Wesley Schmidt

Mailing Address 190 Berkeley Ridge Dr

City

Columbia

State

SC

Zip Code

29229-7579

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-182

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Hugh Schugart

Mailing Address 70 Lakeview Ave

City

Piedmont

State

CA

Zip Code

94611-3515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Actuary II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-96

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Hugh Schugart

Mailing Address 70 Lakeview Ave

City

Piedmont

State

CA

Zip Code

94611-3515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Actuary II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-96

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 221 / 281

(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)

John W. Schwartz

Mailing Address 101 Schreiner Dr

City

North Wales

State

PA

Zip Code

19454-4280

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-447

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

John W. Schwartz

Mailing Address 101 Schreiner Dr

City

North Wales

State

PA

Zip Code

19454-4280

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Business Unit Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-445

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Joseph A. Scibilia

Mailing Address 7 Shea Dr

City

Mansfield

State

MA

Zip Code

02048-3298

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-105

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 222 / 281

(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)

Joseph A. Scibilia

Mailing Address 7 Shea Cir

City

Mansfield

State

MA

Zip Code

02048-3298

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-105

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Daniel Seaverns

Mailing Address 2714 NE 136th St

City

Vancouver

State

WA

Zip Code

98686-2763

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Network Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-39

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Daniel Seaverns

Mailing Address 2714 NE 136th St

City

Vancouver

State

WA

Zip Code

98686-2763

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Network Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-39

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 223 / 281

(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)

Wendy A. Shanahan-Richards

Mailing Address 728 W Jackson Blvd
Apt 412

City	State	Zip Code
Chicago	IL	60661-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Nat'l Medical Director, ASM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-184

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Wendy A. Shanahan-Richards

Mailing Address 728 W Jackson Blvd
Apt 412

City	State	Zip Code
Chicago	IL	60661-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Nat'l Medical Director, ASM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-184

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Rachel L. Shanok

Mailing Address 155 Cranberry Ln

City	State	Zip Code
Cheshire	CT	06410-3504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
QA Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-603

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

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 224 / 281

(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)

Rachel L. Shanok

Mailing Address 155 Cranberry Ln

City

Cheshire

State

CT

Zip Code

06410-3504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

QA Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-601

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

John Sheehy

Mailing Address 25 Williamsburg Ln

City

Unionville

State

CT

Zip Code

06085-1157

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Underwriting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2775.00

Date of Receipt

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

Transaction ID: 112010-34

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

John Sheehy

Mailing Address 25 Williamsburg Ln

City

Unionville

State

CT

Zip Code

06085-1157

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Underwriting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2775.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-34

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 225 / 281

(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)

Sally A. Shepack

Mailing Address 152 Route 390

City

Tafton

State

PA

Zip Code

18464-9616

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-130

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Sally A. Shepack

Mailing Address 152 Route 390

City

Tafton

State

PA

Zip Code

18464-9616

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-130

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Virginia Shepherd

Mailing Address 6315 Cog Hill Dr

City

Pasadena

State

TX

Zip Code

77505-3835

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-584

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 226 / 281

(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)

Virginia Shepherd

Mailing Address 6315 Cog Hill Dr

City

Pasadena

State

TX

Zip Code

77505-3835

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-582

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Tracey Shobert

Mailing Address 5118 E Sierra Sunset Trl

City

Cave Creek

State

AZ

Zip Code

85331-4502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

RX Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-70

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Tracey Shobert

Mailing Address 5118 E Sierra Sunset Trl

City

Cave Creek

State

AZ

Zip Code

85331-4502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

RX Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-70

Amount of Each Receipt this Period

50.00

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 227 / 281

(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)

Jeffrey C. Shuskus

Mailing Address 39 Oakwood Ave

City

West Hartford

State

CT

Zip Code

06119-2174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Application Tech Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-268

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey C. Shuskus

Mailing Address 39 Oakwood Ave

City

West Hartford

State

CT

Zip Code

06119-2174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Application Tech Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-267

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Valerie Bonor Sideris

Mailing Address 155 Hitchcock Rd

City

Southington

State

CT

Zip Code

06489-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Service Delivery

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-495

Amount of Each Receipt this Period

150.00

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 228 / 281

(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)

Valerie Bonor Sideris

Mailing Address 155 Hitchcock Rd

City

Southington

State

CT

Zip Code

06489-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Service Delivery

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-493

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Steven Jay Sigal

Mailing Address 192 Krawski Dr

City

South Windsor

State

CT

Zip Code

06074-3845

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Mng Dir,Strat Resource Mgt-Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2225.00

Date of Receipt

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

Transaction ID: 112010-421

Amount of Each Receipt this Period

185.00

C.

Full Name (Last, First, Middle Initial)

Steven Jay Sigal

Mailing Address 192 Krawski Dr

City

South Windsor

State

CT

Zip Code

06074-3845

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Mng Dir,Strat Resource Mgt-Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2225.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-419

Amount of Each Receipt this Period

190.00

SUBTOTAL of Receipts This Page (optional)

525.00

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 229 / 281

(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)

Todd Slawter

Mailing Address 14400 Eighteenth Fairway

City

Alpharetta

State

GA

Zip Code

30004-4395

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head of Sales SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-55

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Todd Slawter

Mailing Address 14400 Eighteenth Fairway

City

Alpharetta

State

GA

Zip Code

30004-4395

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head of Sales SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-55

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Connie J. Smith

Mailing Address 5811 Atlantic Blvd
Unit 137

City

Jacksonville

State

FL

Zip Code

32207-2284

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-553

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 230 / 281

(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)

Connie J. Smith

Mailing Address 5811 Atlantic Blvd
Unit 137

City	State	Zip Code
Jacksonville	FL	32207-2284

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-551

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Perry D. Somers

Mailing Address 4432 Stryker Dr

City	State	Zip Code
Matthews	NC	28104-6075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
MMA Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-30

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Perry D. Somers

Mailing Address 4432 Stryker Dr

City	State	Zip Code
Matthews	NC	28104-6075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
MMA Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-30

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 231 / 281

(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)

Deidra D. Soret

Mailing Address 313 Harralton Cir

City

Devine

State

TX

Zip Code

78016-2306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Account Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-297

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Deidra D. Soret

Mailing Address 313 Harralton Cir

City

Devine

State

TX

Zip Code

78016-2306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Account Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-296

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Margaret A. Spann

Mailing Address 54 Lawn Ave

City

Portland

State

ME

Zip Code

04103-3133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Pet Insurance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-508

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: PAGE 232 / 281

(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)

Margaret A. Spann

Mailing Address 54 Lawn Ave

City

Portland

State

ME

Zip Code

04103-3133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Pet Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-506

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Elicia Spearman

Mailing Address 661 Ashley Ct

City

Cheshire

State

CT

Zip Code

06410-3246

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-602

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Elicia Spearman

Mailing Address 661 Ashley Ct

City

Cheshire

State

CT

Zip Code

06410-3246

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-600

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 233 / 281

(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)

Eugene G. Speicher

Mailing Address 74 Canada Goose Dr

City

Hackettstown

State

NJ

Zip Code

07840-3117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-578

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Eugene G. Speicher

Mailing Address 74 Canada Goose Dr

City

Hackettstown

State

NJ

Zip Code

07840-3117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-576

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Claire M. Spettell

Mailing Address 1514 E Willow Grove Ave

City

Wyndmoor

State

PA

Zip Code

19038-7654

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Informatics Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-441

Amount of Each Receipt this Period

100.00

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 234 / 281

(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)

Claire M. Spettell

Mailing Address 1514 E Willow Grove Ave

City

Wyndmoor

State

PA

Zip Code

19038-7654

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Informatics Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-439

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Janet Stallmeyer

Mailing Address 8 W 108th Ct

City

Kansas City

State

MO

Zip Code

64114-4991

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medicaid Region Head - Central

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-211

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Janet Stallmeyer

Mailing Address 8 W 108th Ct

City

Kansas City

State

MO

Zip Code

64114-4991

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medicaid Region Head - Central

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-210

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)

933.32

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 235 / 281

(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)

Barbara S. Stefan

Mailing Address 928 W Carmen Ave
Apt 2

City State Zip Code
Chicago IL 60640-6374

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-432

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Barbara S. Stefan

Mailing Address 928 W Carmen Ave
Apt 2

City State Zip Code
Chicago IL 60640-6374

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-430

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Sharon Ann Stegmuller

Mailing Address 653 Sycamore Dr

City State Zip Code
Brawley CA 92227-3036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
PLS Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-328

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 236 / 281

(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)

Sharon Ann Stegmuller

Mailing Address 653 Sycamore Dr

City

Brawley

State

CA

Zip Code

92227-3036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

PLS Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-327

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Donald L. Steisel

Mailing Address 11 Cherokee Dr

City

Danbury

State

CT

Zip Code

06811-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-494

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Donald L. Steisel

Mailing Address 11 Cherokee Dr

City

Danbury

State

CT

Zip Code

06811-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

SGB Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-492

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 237 / 281

(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)

Ann P. Stelmat

Mailing Address 617 Lincoln St

City

New Britain

State

CT

Zip Code

06052-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Strategy & Bus Devlpmnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-242

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ann P. Stelmat

Mailing Address 617 Lincoln St

City

New Britain

State

CT

Zip Code

06052-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Strategy & Bus Devlpmnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-241

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Robert J. Stillman

Mailing Address 35 Woodhaven Dr

City

Simsbury

State

CT

Zip Code

06070-2642

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3075.00

Date of Receipt

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

Transaction ID: 112010-385

Amount of Each Receipt this Period

256.25

SUBTOTAL of Receipts This Page (optional)

306.25

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 238 / 281

(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)

Robert J. Stillman

Mailing Address 35 Woodhaven Dr

City

Simsbury

State

CT

Zip Code

06070-2642

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3075.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-384

Amount of Each Receipt this Period

256.25

B.

Full Name (Last, First, Middle Initial)

Caroline S. Stinchcomb

Mailing Address 30810 N 52nd PI

City

Cave Creek

State

AZ

Zip Code

85331-3017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
MMA Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-389

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Caroline S. Stinchcomb

Mailing Address 30810 N 52nd PI

City

Cave Creek

State

AZ

Zip Code

85331-3017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
MMA Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-388

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

306.25

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 239 / 281

(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)

John C. Stockton

Mailing Address 2757 W 131st Ter

City

Leawood

State

KS

Zip Code

66209-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-491

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

John C. Stockton

Mailing Address 2757 W 131st Ter

City

Leawood

State

KS

Zip Code

66209-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-489

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

John Sullivan

Mailing Address 221 Bartholomew Rd

City

Middletown

State

CT

Zip Code

06457-4803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-299

Amount of Each Receipt this Period

25.00

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 240 / 281

(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)

John Sullivan

Mailing Address 221 Bartholomew Rd

City

Middletown

State

CT

Zip Code

06457-4803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-298

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Kenneth Sullivan

Mailing Address 5270 Round Table Dr

City

San Antonio

State

TX

Zip Code

78218-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Care Management Nurse Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-530

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Kenneth Sullivan

Mailing Address 5270 Round Table Dr

City

San Antonio

State

TX

Zip Code

78218-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Care Management Nurse Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-528

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: PAGE 241 / 281

(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)

Christopher Sura

Mailing Address 2 Ellen Dr

City

Beacon Falls

State

CT

Zip Code

06403-1508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Systems Engineering Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-414

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Christopher Sura

Mailing Address 2 Ellen Dr

City

Beacon Falls

State

CT

Zip Code

06403-1508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Systems Engineering Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-412

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

David A. Taaffe

Mailing Address 27382 Silver Creek Dr

City

San Juan Capistran

State

CA

Zip Code

92675-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head of Sales W

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-560

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

250.00

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 242 / 281

(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)

David A. Taaffe

Mailing Address 27382 Silver Creek Dr

City

San Juan Capistran

State

CA

Zip Code

92675-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Head of Sales W

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-558

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Robert L. Tambellini

Mailing Address 722 Mallard St

City

Millville

State

NJ

Zip Code

08332-2313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-545

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Robert L. Tambellini

Mailing Address 722 Mallard St

City

Millville

State

NJ

Zip Code

08332-2313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-543

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

190.00

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 243 / 281

(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)

Edward Tanida

Mailing Address 7 Sugar Hollow Ln

City

West Simsbury

State

CT

Zip Code

06092-2312

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Network Operations Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-461

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Edward Tanida

Mailing Address 7 Sugar Hollow Ln

City

West Simsbury

State

CT

Zip Code

06092-2312

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Region Network Operations Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-459

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Martha R. Temple

Mailing Address Rr#1 194 Little Lane

City

Durham

State

CT

Zip Code

06422-1303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head NE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

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

Transaction ID: 112010-346

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 244 / 281

(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)

Martha R. Temple

Mailing Address Rr#1 194 Little Lane

City

Durham

State

CT

Zip Code

06422-1303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head NE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-345

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

J. Brian Ternan

Mailing Address 1984 Greenbank Rd

City

Thousand Oaks

State

CA

Zip Code

91361-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head W

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-313

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

J. Brian Ternan

Mailing Address 1984 Greenbank Rd

City

Thousand Oaks

State

CA

Zip Code

91361-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head W

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-312

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 245 / 281

(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)

Gary J. Thomas

Mailing Address 46 Princeton Dr

City

Avon

State

CT

Zip Code

06001-3199

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicare

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2000.04

Date of Receipt

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

Transaction ID: 112010-520

Amount of Each Receipt this Period

166.67

B.

Full Name (Last, First, Middle Initial)

Gary J. Thomas

Mailing Address 46 Princeton Dr

City

Avon

State

CT

Zip Code

06001-3199

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of Medicare

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2000.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-518

Amount of Each Receipt this Period

166.67

C.

Full Name (Last, First, Middle Initial)

Regina G. Thornton

Mailing Address 810 Bardon Ct

City

Cheshire

State

CT

Zip Code

06410-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Compliance Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-243

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

383.34

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 246 / 281

(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)

Regina G. Thornton

Mailing Address 810 Bardon Ct

City

Cheshire

State

CT

Zip Code

06410-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-242

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Jay E. Timm

Mailing Address 715 Brentwood Blvd

City

Copley

State

OH

Zip Code

44321-1478

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-418

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Jay E. Timm

Mailing Address 715 Brentwood Blvd

City

Copley

State

OH

Zip Code

44321-1478

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head MA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-416

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

350.00

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 247 / 281

(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)

Brooke Flaherty Tiner

Mailing Address 93 Peachtree PI NE
Apt 1

City	State	Zip Code
Atlanta	GA	30309-3952

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-588

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Brooke Flaherty Tiner

Mailing Address 93 Peachtree PI NE
Apt 1

City	State	Zip Code
Atlanta	GA	30309-3952

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Sr State Gov Rel Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-586

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Robert Anthony Tobin

Mailing Address 62 Raymond Rd

City	State	Zip Code
Danby	VT	05739-9789

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Senior Architect Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

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

Transaction ID: 112010-146

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 248 / 281

(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)

Robert Anthony Tobin

Mailing Address 62 Raymond Rd

City

Danby

State

VT

Zip Code

05739-9789

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Architect Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-147

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Russell Tolson

Mailing Address 112 Crestview Dr

City

Barto

State

PA

Zip Code

19504-9305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 112010-595

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Russell Tolson

Mailing Address 112 Crestview Dr

City

Barto

State

PA

Zip Code

19504-9305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-593

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 249 / 281

(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)

Jonathan M. Topodas

Mailing Address 10314 Regency Station Dr

City

Fairfax Station

State

VA

Zip Code

22039-1800

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-222

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Jonathan M. Topodas

Mailing Address 10314 Regency Station Dr

City

Fairfax Station

State

VA

Zip Code

22039-1800

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-221

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Marilyn Germano Trabold

Mailing Address 47 Lookout Hill Rd

City

Milford

State

CT

Zip Code

06461-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Financial Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-352

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 250 / 281

(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)

Marilyn Germano Trabold

Mailing Address 47 Lookout Hill Rd

City

Milford

State

CT

Zip Code

06461-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Financial Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-351

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Susan C. Tully Abdo

Mailing Address 260 S Main Ave

City

Albany

State

NY

Zip Code

12208-2432

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-581

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Susan C. Tully Abdo

Mailing Address 260 S Main Ave

City

Albany

State

NY

Zip Code

12208-2432

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr State Gov Rel Specialist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-579

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: PAGE 251 / 281

(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)

David E. Tyrrell

Mailing Address 208 Cone Meadow Ct

City

West Granby

State

CT

Zip Code

06090-1421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

RE Information Mgmt Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

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

Transaction ID: 112010-239

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

David E. Tyrrell

Mailing Address 208 Cone Meadow Ct

City

West Granby

State

CT

Zip Code

06090-1421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

RE Information Mgmt Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-238

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Hyong Un

Mailing Address 507 Riverview Rd

City

Swarthmore

State

PA

Zip Code

19081-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of EAP & Chief Psych Offcr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-608

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 252 / 281

(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)

Hyong Un

Mailing Address 507 Riverview Rd

City

Swarthmore

State

PA

Zip Code

19081-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of EAP & Chief Psych Offcer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-606

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Louis E. Ursini, JR.

Mailing Address 31 Deveron Dr

City

Madison

State

CT

Zip Code

06443-3467

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Technology & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-320

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Louis E. Ursini, JR.

Mailing Address 31 Deveron Dr

City

Madison

State

CT

Zip Code

06443-3467

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd of Technology & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-319

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 253 / 281

(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)

David Van Dyk

Mailing Address 1422 S Hazel St

City

Gilbert

State

AZ

Zip Code

85296-9769

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, RE Lease Mgmt & Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1655.04

Date of Receipt

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

Transaction ID: 112010-204

Amount of Each Receipt this Period

137.92

B.

Full Name (Last, First, Middle Initial)

David Van Dyk

Mailing Address 1422 S Hazel St

City

Gilbert

State

AZ

Zip Code

85296-9769

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, RE Lease Mgmt & Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1655.04

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-203

Amount of Each Receipt this Period

137.92

C.

Full Name (Last, First, Middle Initial)

Burton Vanderlaan

Mailing Address 14834 Poplar Rd

City

Orland Park

State

IL

Zip Code

60462-3456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Reg. Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-36

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

325.84

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 254 / 281

(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)

Burton Vanderlaan

Mailing Address 14834 Poplar Rd

City

Orland Park

State

IL

Zip Code

60462-3456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Reg. Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-36

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Marcia A. Vannuccini

Mailing Address 5 Thainstone

City

Cromwell

State

CT

Zip Code

06416-2705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-84

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Marcia A. Vannuccini

Mailing Address 5 Thainstone

City

Cromwell

State

CT

Zip Code

06416-2705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Product Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-84

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

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 255 / 281

(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)

Bernadette G. Vida

Mailing Address 1050 W Beal Rd

City

Flagstaff

State

AZ

Zip Code

86001-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-600

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Bernadette G. Vida

Mailing Address 1050 W Beal Rd

City

Flagstaff

State

AZ

Zip Code

86001-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-598

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Marcia J. Wade

Mailing Address 60 Sutton Pl S

City

New York

State

NY

Zip Code

10022-4168

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-194

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 256 / 281

(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)

Marcia J. Wade

Mailing Address 60 Sutton Pl S

City

New York

State

NY

Zip Code

10022-4168

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-194

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Kimberlee Anne Walters

Mailing Address 6501 Blanch Cir

City

Dallas

State

TX

Zip Code

75214-3428

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

GRP Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.63

Date of Receipt

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

Transaction ID: 112010-601

Amount of Each Receipt this Period

58.33

C.

Full Name (Last, First, Middle Initial)

Kimberlee Anne Walters

Mailing Address 6501 Blanch Cir

City

Dallas

State

TX

Zip Code

75214-3428

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

GRP Senior Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.63

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-599

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

183.33

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 257 / 281

(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)

Teresa Wankum

Mailing Address 400 Appian Way

City

Doylestown

State

PA

Zip Code

18901-2046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of National Customer Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-521

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Teresa Wankum

Mailing Address 400 Appian Way

City

Doylestown

State

PA

Zip Code

18901-2046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head of National Customer Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-519

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

John Ward

Mailing Address 205 Marlboro Rd

City

Yardley

State

PA

Zip Code

19067-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-542

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

325.00

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 258 / 281

(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)

John Ward

Mailing Address 205 Marlboro Rd

City

Yardley

State

PA

Zip Code

19067-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-540

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Stacie J. Watson

Mailing Address 49 Brookline Dr

City

West Hartford

State

CT

Zip Code

06107-1265

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Cust Ops Shared Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-569

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Stacie J. Watson

Mailing Address 49 Brookline Dr

City

West Hartford

State

CT

Zip Code

06107-1265

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Cust Ops Shared Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-567

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 259 / 281

(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)

Allyn M. Webert

Mailing Address 158 Birch Hill Rd

City

Stowe

State

VT

Zip Code

05672-4633

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-375

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Allyn M. Webert

Mailing Address 158 Birch Hill Rd

City

Stowe

State

VT

Zip Code

05672-4633

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-374

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Lynette M. Weigel

Mailing Address 4814 Fountainblue Dr

City

Bismarck

State

ND

Zip Code

58503-8853

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-151

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 260 / 281

(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)

Lynette M. Weigel

Mailing Address 4814 Fountainblue Dr

City

Bismarck

State

ND

Zip Code

58503-8853

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-152

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

David Weisman

Mailing Address 11918 Oakleaf Dr

City

Davie

State

FL

Zip Code

33330-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Network Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-89

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

David Weisman

Mailing Address 11918 Oakleaf Dr

City

Davie

State

FL

Zip Code

33330-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Network Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-89

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: PAGE 261 / 281

(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)

Melinda Westbrook

Mailing Address 14 Westridge Dr

City

Simsbury

State

CT

Zip Code

06070-2916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.66

Date of Receipt

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

Transaction ID: 112010-366

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Melinda Westbrook

Mailing Address 14 Westridge Dr

City

Simsbury

State

CT

Zip Code

06070-2916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-365

Amount of Each Receipt this Period

41.66

C.

Full Name (Last, First, Middle Initial)

David F. Wiater

Mailing Address 4325 Oakton Dr

City

High Point

State

NC

Zip Code

27265-9220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.Occupation
Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-540

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

91.66

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 262 / 281

(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)

David F. Wiater

Mailing Address 4325 Oakton Dr

City

High Point

State

NC

Zip Code

27265-9220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-538

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Geoffrey E. Wiczynski

Mailing Address 1066 Serrano Ct

City

Lafayette

State

CA

Zip Code

94549-3123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Reg Finance Officer, West

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-341

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Geoffrey E. Wiczynski

Mailing Address 1066 Serrano Ct

City

Lafayette

State

CA

Zip Code

94549-3123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Reg Finance Officer, West

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-340

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 263 / 281

(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)

Matthew N. Wiggin

Mailing Address 136 Penn Dr

City

West Hartford

State

CT

Zip Code

06119-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Comm. Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-93

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Matthew N. Wiggin

Mailing Address 136 Penn Dr

City

West Hartford

State

CT

Zip Code

06119-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Comm. Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-93

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Gregory Alan Wiggins

Mailing Address 8008 W Elm St

City

Tampa

State

FL

Zip Code

33615-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Customer Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-419

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 264 / 281

(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)

Gregory Alan Wiggins

Mailing Address 8008 W Elm St

City

Tampa

State

FL

Zip Code

33615-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Customer Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-417

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Jack W. Wiggins

Mailing Address 6032 Lakeside Dr

City

Fort Worth

State

TX

Zip Code

76179-6613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, HR Acq Integ Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-376

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Jack W. Wiggins

Mailing Address 6032 Lakeside Dr

City

Fort Worth

State

TX

Zip Code

76179-6613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, HR Acq Integ Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-375

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 265 / 281

(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)

Barbara Wilkinson

Mailing Address 81 Reynosa

City

San Antonio

State

TX

Zip Code

78261-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MDCR Market Head of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-567

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Barbara Wilkinson

Mailing Address 81 Reynosa

City

San Antonio

State

TX

Zip Code

78261-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MDCR Market Head of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-565

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Ronald A. Williams

Mailing Address 11 Farnham Way

City

Farmington

State

CT

Zip Code

06032-1564

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 1 0

Transaction ID: F43B9065812442994DE

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5050.00

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 266 / 281

(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)

Christopher Wilson

Mailing Address 29 Griswold Dr

City

West Hartford

State

CT

Zip Code

06119-1147

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-63

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Christopher Wilson

Mailing Address 29 Griswold Dr

City

West Hartford

State

CT

Zip Code

06119-1147

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-63

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Martha L. Wofford

Mailing Address 3 Pine Edge Way

City

Hatfield

State

MA

Zip Code

01038-9790

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Product & Strategy- LE&C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID: 112010-98

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

190.00

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 267 / 281

(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)

Martha L. Wofford

Mailing Address 3 Pine Edge Way

City

Hatfield

State

MA

Zip Code

01038-9790

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Product & Strategy- LE&C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-98

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Steve E. Wohlwend

Mailing Address 3746 Pinckney Island Ct

City

Jacksonville

State

FL

Zip Code

32224-7685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

National Distribution Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-377

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Steve E. Wohlwend

Mailing Address 3746 Pinckney Island Ct

City

Jacksonville

State

FL

Zip Code

32224-7685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

National Distribution Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-376

Amount of Each Receipt this Period

25.00

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 268 / 281

(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)

James P. Wolf

Mailing Address 9495 River Lake Dr

City

Roswell

State

GA

Zip Code

30075-5037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-550

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

James P. Wolf

Mailing Address 9495 River Lake Dr

City

Roswell

State

GA

Zip Code

30075-5037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-548

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Gary M. Wolters

Mailing Address 101 Belle Woods Dr

City

Glastonbury

State

CT

Zip Code

06033-1664

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation
Senior Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-99

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 269 / 281

(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)

Gary M. Wolters

Mailing Address 101 Belle Woods Dr

City

Glastonbury

State

CT

Zip Code

06033-1664

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Senior Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-99

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

William S. Wood

Mailing Address 14051 Point Anne Dr

City

Odessa

State

FL

Zip Code

33556-4301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: 112010-104

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

William S. Wood

Mailing Address 14051 Point Anne Dr

City

Odessa

State

FL

Zip Code

33556-4301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-104

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 270 / 281

(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)

Elease E. Wright

Mailing Address 205 Girard Ave

City

Hartford

State

CT

Zip Code

06105-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Of Ahr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-258

Amount of Each Receipt this Period

416.66

B.

Full Name (Last, First, Middle Initial)

Elease E. Wright

Mailing Address 205 Girard Ave

City

Hartford

State

CT

Zip Code

06105-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head Of Ahr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-257

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Raynette B. Wright

Mailing Address 2307 N Hayes Ave

City

Fresno

State

CA

Zip Code

93723-9206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-382

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

858.32

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 271 / 281

(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)

Raynette B. Wright

Mailing Address 2307 N Hayes Ave

City

Fresno

State

CA

Zip Code

93723-9206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-381

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Scott D. Yokley

Mailing Address 1603 Wood Song Dr

City

Sugar Land

State

TX

Zip Code

77479-6492

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

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

Transaction ID: 112010-480

Amount of Each Receipt this Period

97.50

C.

Full Name (Last, First, Middle Initial)

Scott D. Yokley

Mailing Address 1603 Wood Song Dr

City

Sugar Land

State

TX

Zip Code

77479-6492

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Market Head of Sales & Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-478

Amount of Each Receipt this Period

97.50

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 272 / 281

(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)

Christina L. Young

Mailing Address 70 Kingfisher Cir

City

South Windsor

State

CT

Zip Code

06074-4307

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-1

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Christina L. Young

Mailing Address 70 Kingfisher Cir

City

South Windsor

State

CT

Zip Code

06074-4307

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Bus Project Program Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-1

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey Young

Mailing Address 12 Oberlin St

City

Maplewood

State

NJ

Zip Code

07040-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-68

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

120.00

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 273 / 281

(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)

Jeffrey Young

Mailing Address 12 Oberlin St

City

Maplewood

State

NJ

Zip Code

07040-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

MMA Manager, Account Directors

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-68

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Patrick R. Young

Mailing Address 2926 Comfort Rd

City

New Hope

State

PA

Zip Code

18938-5620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head NE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 112010-450

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Patrick R. Young

Mailing Address 2926 Comfort Rd

City

New Hope

State

PA

Zip Code

18938-5620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Local Market Head NE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	4		2	0	1	0

Transaction ID: 122110-448

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

520.00

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 274 / 281

(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)

Thomas A. Young

Mailing Address 51 Backland Rd

City

South Glastonbury

State

CT

Zip Code

06073-3127

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: 112010-306

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Thomas A. Young

Mailing Address 51 Backland Rd

City

South Glastonbury

State

CT

Zip Code

06073-3127

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-305

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Elizabeth A. Yurkanin

Mailing Address 1307 Canyon Ridge Dr

City

Broad Brook

State

CT

Zip Code

06016-5608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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

Transaction ID: 112010-275

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

475.00

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 275 / 281

(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)

Elizabeth A. Yurkanin

Mailing Address 1307 Canyon Ridge Dr

City

Broad Brook

State

CT

Zip Code

06016-5608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Site Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-274

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Cindy Ris Zanca

Mailing Address 29 Davidson Ave

City

Ramsey

State

NJ

Zip Code

07446-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Marketing Comm Unit Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 112010-555

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Cindy Ris Zanca

Mailing Address 29 Davidson Ave

City

Ramsey

State

NJ

Zip Code

07446-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Marketing Comm Unit Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	4	/	2	0	1	0

Transaction ID: 122110-553

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 276 / 281

(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)

Eleanor R. Zaugg

Mailing Address 3 Wyncourte

City

East Granby

State

CT

Zip Code

06026-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Tech Infrastruct Supp Dept Hd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: 112010-248

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Eleanor R. Zaugg

Mailing Address 3 Wyncourte

City

East Granby

State

CT

Zip Code

06026-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Tech Infrastruct Supp Dept Hd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-247

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Amy Zinsser

Mailing Address 27 Birch Rd

City

West Hartford

State

CT

Zip Code

06119-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Mrkt & Customer Insights

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 112010-38

Amount of Each Receipt this Period

25.00

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 277 / 281

(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)

Amy Zinsser

Mailing Address 27 Birch Rd

City

West Hartford

State

CT

Zip Code

06119-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Hd, Mrkt & Customer Insights

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-38

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Joseph Zubretsky

Mailing Address 357 River Rd

City

Deep River

State

CT

Zip Code

06417-2121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr EVP, Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

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

Transaction ID: 112010-169

Amount of Each Receipt this Period

416.66

C.

Full Name (Last, First, Middle Initial)

Joseph Zubretsky

Mailing Address 357 River Rd

City

Deep River

State

CT

Zip Code

06417-2121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Sr EVP, Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 1 0

Transaction ID: 122110-170

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)

858.32

TOTAL This Period (last page this line number only)

75475.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 278 / 281

<input checked="" 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 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)

Bank of America

Mailing Address 777 Main Street

City
HartfordState
CTZip Code
06107Purpose of Disbursement
Check Reorder

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: MB1E97711D132ECBD4DD

Date of Disbursement

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Amount of Each Disbursement this Period

109.00

SUBTOTAL of Disbursements This Page (optional)

109.00

TOTAL This Period (last page this line number only)

109.00

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Dakpac</p> <p>Mailing Address 700 13th Street, NW Suite 600</p> <p>City Washington Dc State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Dakpac</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Contribution</p>	<p>Transaction ID: 1B9E2AE1878984C1771</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Nelson 2012</p> <p>Mailing Address PO Box 8666</p> <p>City Omaha State NE Zip Code 68108</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name E. Benjamin Nelson</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NE District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Contribution</p>	<p>Transaction ID: 9EFEB5E25A1975C498F</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Secure America's Majority Pac (SAM-PAC)</p> <p>Mailing Address PO Box 860159</p> <p>City Plano State TX Zip Code 75086</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Secure America's Majority Pac (SAM-PAC)</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Contribution</p>	<p>Transaction ID: E5CA2C479E14A369718</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

4500.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Senate Majority Fund

Mailing Address PO Box 32025

City
Phoenix

State
AZ

Zip Code
85064

Purpose of Disbursement
Contribution

Candidate Name
Senate Majority Fund

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Transaction ID: 8CB0AFA0DA4BCEF6B47

Date of Disbursement

12 / 14 / 2010

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

U.S.-Cuba Democracy Political Action Committee

Mailing Address PO Box 22945

City
Hialeah

State
FL

Zip Code
33002

Purpose of Disbursement
Contribution

Candidate Name
U.S.-Cuba Democracy Political Action Committee

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Transaction ID: ED72DB4F6A7F6CABB92

Date of Disbursement

12 / 15 / 2010

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

7300.00

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

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Kelly Hancock Campaign	Transaction ID: E6D81A4C2A1DAE28284 Date of Disbursement
Mailing Address P. O. Box 821349	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 7 / 2 0 1 0</div> </div>
City N. Richland Hills State TX Zip Code 76182	Amount of Each Disbursement this Period
Purpose of Disbursement Voided Contribution of 9/15/2010	<div>-1000.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B. Full Name (Last, First, Middle Initial) Texans for John Davis	Transaction ID: 3A20664CDFEE8837D6E Date of Disbursement
Mailing Address 815 Brazos Street Suite 701	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 7 / 2 0 1 0</div> </div>
City Austin State TX Zip Code 78701	Amount of Each Disbursement this Period
Purpose of Disbursement Voided Contribution of 9/15/2010	<div>-500.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C. Full Name (Last, First, Middle Initial) The Mabrie Jackson Campaign	Transaction ID: D1C3CACC10FA3A56B09 Date of Disbursement
Mailing Address 3209 Gary	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 7 / 2 0 1 0</div> </div>
City Plano State TX Zip Code 75023	Amount of Each Disbursement this Period
Purpose of Disbursement Voided Contribution of 3/19/2010	<div>-500.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
SUBTOTAL of Disbursements This Page (optional)	<div>-2000.00</div>
TOTAL This Period (last page this line number only)	<div>-2000.00</div>