

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 263 OF 316

(check only one)

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

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

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

A. Staples, David, J, ,

Mailing Address 530 Great Circle Rd

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

C

Name of Employer (for Individual)

Cigna Corp

Occupation (for Individual)

Customer Service Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2020

Transaction ID : 20200325162914-25462

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Stapleton, Kenneth, , ,

Mailing Address 7555 Goodwin Rd

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

C

Name of Employer (for Individual)

CT GENERAL LIFE INSURANCE CO

Occupation (for Individual)

VP Talent Acquisition

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2020

Transaction ID : 2020031116513-7835

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Stapleton, Kenneth, , ,

Mailing Address 7555 Goodwin Rd

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

C

Name of Employer (for Individual)

CT GENERAL LIFE INSURANCE CO

Occupation (for Individual)

VP Talent Acquisition

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2020

Transaction ID : 20200325162914-7789

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

250.00